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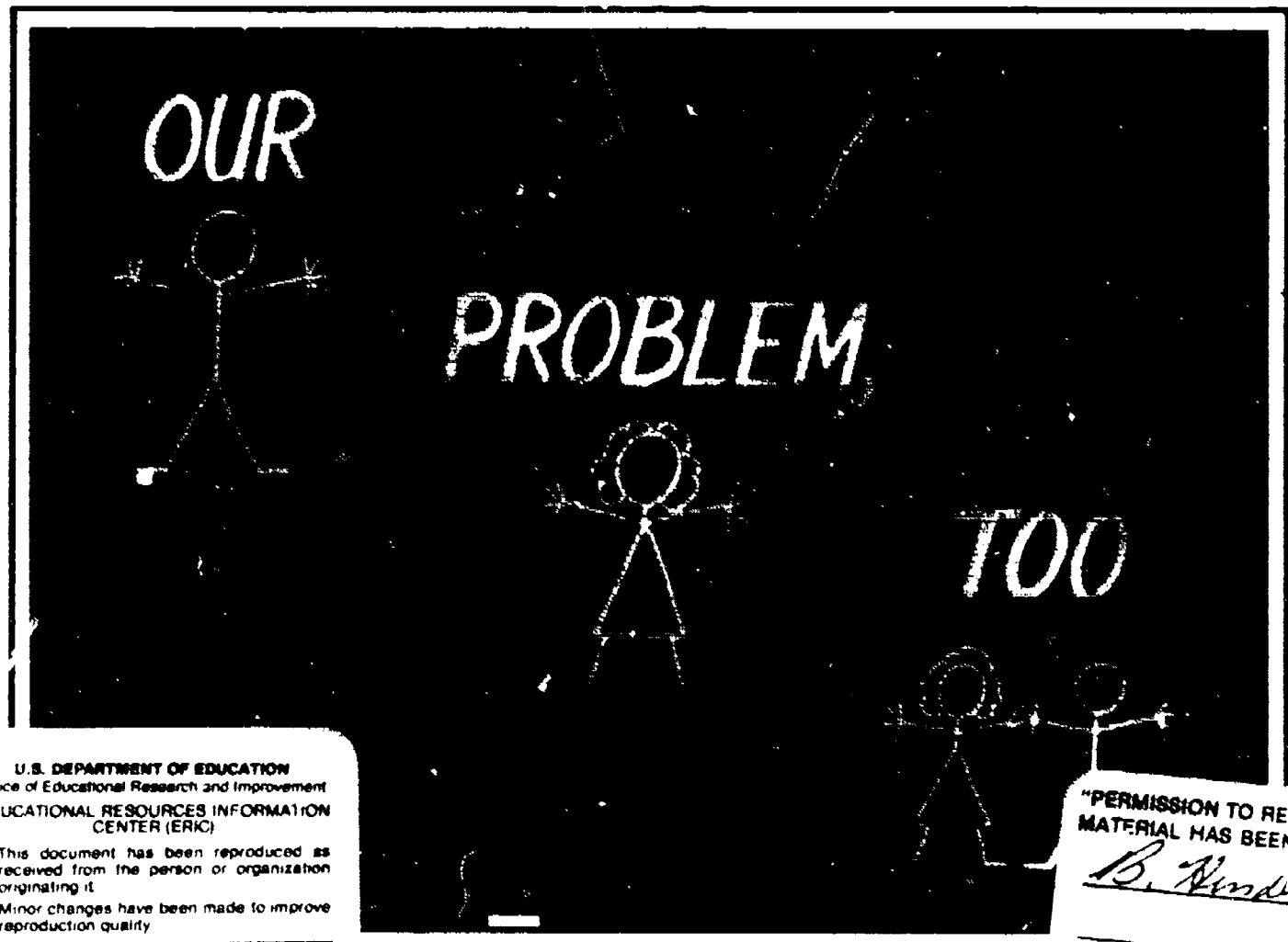
ABSTRACT

This publication contains recommended guidelines for developing an AIDS curriculum that will meet the needs of Arizona school districts and recognize local sensitivities. It is emphasized that parental involvement and community support are the key elements for successful AIDS education. These guidelines suggest appropriate background materials that are flexible and adaptable to each community's needs and interests. Suggestions are made for developing an AIDS curriculum. Three AIDS education programs are outlined for three different grade levels: K-3, 4-5, and 6-12. Class activities are suggested, and transparencies and handouts are provided. A resource list of health agencies, books, pamphlets, and other education aids is included, and information and guidelines are presented on disease transmission prevention for school personnel. (JD)

AIDS...



A K-12 Education Program

ARIZONA DEPARTMENT OF EDUCATION
C. Diane Bishop, Superintendent

ARIZONA DEPARTMENT OF HEALTH SERVICES
Ted Williams, Director

April 1988

The contents of this publication were developed under a grant from the U.S. Department of Education. However, those contents do not necessarily represent the policy of that agency, and you should not assume endorsement by the Federal Government.
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ARIZONA DEPARTMENT OF HEALTH SERVICES

Office of the Director

ROSE MOFFORD, GOVERNOR
TED WILLIAMS, DIRECTOR

April 21, 1988

Dear Education and Public Health Colleague:

The Arizona Department of Health Services and the Arizona Department of Education have joined together in the development of these guidelines for classroom instruction regarding AIDS in Arizona schools.

Acquired Immunodeficiency Syndrome (AIDS) represents a lethal threat to our young people. The development of sound education and prevention programs throughout Arizona is a critical part in statewide plans to combat this dreaded disease and cannot be delayed.

These guidelines provide appropriate background materials for school administrators and teachers that are flexible and adaptable to each community's needs and interests. It is hoped that every school system will integrate AIDS education in their comprehensive health education curriculum. It is also hoped that schools will seek technical advice and assistance from local health departments and local AIDS service organizations as they address this important public health issue.

Sincerely,

Ted Williams

Ted Williams
Director

TW:BL:kl

The Department of Health Services is An Equal Opportunity Affirmative Action Employer.

C. DIANE BISHOP
Superintendent

Arizona
Department of Education
1535 WEST JEFFERSON
PHOENIX, ARIZONA 85007
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May, 1988

Dear Education and Public Health Colleague:

The Arizona Department of Education and the Arizona Department of Health Services are pleased to offer you this K-12 AIDS Education Program. The program was developed to assist local school districts in the development of their AIDS curriculum.

In November 1987, an AIDS Education Advisory Committee was formed with representatives from the Arizona Department of Education, Arizona Department of Health Services, and the Arizona School Boards Association. This committee helped to ensure that the program be educationally sound and contain current and accurate medical information.

This is not a curriculum. Rather, it is a recommended guideline for developing such a curriculum. To be used effectively, a local district will need to form a committee of parents, curriculum specialists, and other community personnel to develop an AIDS curriculum that will meet the needs of the district and recognize local sensitivities. Parental involvement and community support are and will continue to be the key elements for successful AIDS education.

AIDS represents a fatal threat to our young people. School districts can play a vital role in the fight against this dreaded disease by offering sound, medically accurate curricula.

Sincerely,

C. Diane Bishop

C. Diane Bishop
State Superintendent of Public Instruction

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The Arizona Department of Education gratefully acknowledges the assistance of the following individuals who served as members of the AIDS Education Advisory Committee in the development of this program.

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Massachusetts; Massachusetts Department of Public Health and Massachusetts Department of Education: Learn & Live, A Teaching Guide on AIDS Prevention.

Nebraska; Nebraska Department of Health and Nebraska Department of Education: AIDS: A Resource Guide.

New Jersey; New Jersey Department of Health and New Jersey Department of Education: AIDS Instructional Guide for Teachers Grades 9 Through 12.

New York; The University of the State of New York, The State Education Department: AIDS Instructional Guide Grades K-12.

Wisconsin; Wisconsin Department of Public Instruction: Preventing the Spread of Communicable Diseases.

AIDS EDUCATION PROGRAM

TABLE OF CONTENTS

NOTE: For easy reference, all information for teachers and school personnel has been printed on green paper.

TEACHER INFORMATION

TEACHER INFORMATION

BACKGROUND

Taking responsibility for one's own learning is vital when dealing with the subject of AIDS. As the Surgeon General points out in his report, teenagers often consider themselves immune to the dangers and risks associated with life. By seeing themselves as immortal, they may well be putting themselves at great risk. A developmental educational approach encourages students to engage in decision-making activities. In this way, they move from being merely recipients of information to becoming responsible decision makers.

Teaching students about AIDS is one of the most important challenges for an educator at this time. It is a subject that tests the mettle of every educator, certainly calling for a broad range of teaching skills. Educators must stress the growing health crisis never before experienced in human history. Simultaneously, they must combat the existing and potential anxiety, panic and discrimination surrounding the subject. They must realize that, without a doubt, teaching students about AIDS is more than just passing on information; instruction can literally save lives.

The AIDS issue challenges attitudes and anxieties about sexuality, drug use, lifestyles and moralities. Young people are becoming exposed to sex and drugs at an increasingly early age. Adults cannot ignore their responsibility to protect young people from dangerous situations when possible, prepare them to cope with pressures and risks and help them learn to make responsible decisions and act to preserve their health.

STATISTICS

The U.S. Public Health Service has projected that, by 1991,

approximately 270,000 people will have contracted AIDS, with 74,000 cases occurring in 1991 alone;

approximately 179,000 people will have died from the disease, 54,000 in 1991 alone;

almost 7,000 new AIDS cases will have occurred through heterosexual contact, up from 1,100 in 1986; and

approximately 3,000 children, a tenfold increase, will have contracted AIDS.

The Arizona Department of Health Services has projected that, by 1991, approximately 2,000 cases of AIDS will have been reported in the State of Arizona.

On a global level, it is estimated that 1 million people are suffering from AIDS-related diseases, with 100,000 having been diagnosed as having fully developed AIDS. Up to 10 million people may be carriers of the disease. The World Health Organization warns that, by the year 1990, the number of people infected by the AIDS virus worldwide, and thus carriers of the disease, could reach 100 million people.

These figures have compelled health officials around the world to implement widespread programs of information and education for the general public. The U.S. Surgeon General, C. Everett Koop, in a report to the public, has called for greater use of the main weapon currently at hand for controlling the AIDS virus: public education about the disease. The National Academy of Sciences has released a report warning that the AIDS epidemic "could become a catastrophe" without a strong campaign of education and research.

Eighty-five percent of sexually transmitted diseases are contracted by people 15 to 30 years old. Nearly 1.2 million young women become pregnant each year, and, at current rates, 40 percent will conceive during their teenage years. These statistics are more alarming when the activities that caused these sexually transmitted diseases and pregnancies are identified as activities that can expose individuals to the AIDS virus.

Many teenagers also experiment with drugs. While national statistics on teenage intravenous drug use are not available, conservative estimates suggest over 200,000 high school students have used heroin; about 2 million have used other opiates; about 7 million have used stimulants; and over 30 million have used cocaine. All of these substances may be used intravenously, putting the user at risk for contact with the AIDS virus.

THE CHALLENGE TO ARIZONA EDUCATORS

The Arizona Department of Education and the Arizona Department of Health Services are disturbed by these statistics. They agree with the Surgeon General's report that the best prevention for teenagers against the AIDS virus is abstinence from sexual activities and intravenous drug use. However, they also agree with the Surgeon General that teenagers must be taught in clear and explicit ways how to protect themselves from contracting the disease if they do engage in these activities.

Therefore, the Arizona Department of Education and the Arizona Department of Health Services urge all educators to inform their students now about what AIDS is and how they can prevent the contact and spread of this deadly disease.

Although the need for public awareness and education concerning the AIDS virus is widely recognized, this issue broaches a subject matter that has frequently been avoided in the classrooms. AIDS is an infectious disease, contagious in the same ways as sexually transmitted diseases such as syphilis and gonorrhea are contagious. However, the threat of AIDS should be sufficient to permit an educational program that is clear and explicit.

Materials should be presented as simply, yet as explicitly and specifically as possible. Discussions should include information about bodily functions, sexual activities and intravenous drug use. Students need to hear very specifically that certain behaviors will increase the risk of contracting the AIDS virus and that certain behaviors will protect them from infection.

SEXUALLY TRANSMITTED DISEASE SUMMARY SHEET

Sexually transmitted diseases (STD) are a major health problem. Almost 20 million persons are affected each year. About one-half of STD patients are under the age of 25. Untreated STDs can lead to sterility, pelvic inflammatory disease, infant damage, mental illness and death. Anyone, regardless of sex, race or social status, can get an STD.

WHAT ARE STDs? Scientists now know that many diseases can be passed sexually, therefore, a new term - sexually transmitted diseases - is used instead of venereal diseases. Common sexually transmitted diseases include AIDS, chlamydial infections, Gardnerella vaginitis, genital herpes, genital warts, gonorrhea, hepatitis, pediculosis pubis, syphilis and trichomoniasis.

HOW ARE STDs SPREAD? Sexually transmitted diseases are caused by germs passed during sexual contact. Some can be transmitted by objects, although this is not common. An infected mother can pass an STD to her child during pregnancy or childbirth. A person can get the same STD many times.

HOW DOES SOMEONE AVOID CONTRACTING AN STD? Not having sex is the surest way of avoiding a sexually transmitted disease. Having sex with only one partner where the couple are uninfected is the next best method. Persons having intercourse with many partners have the greatest chance of getting an STD. They can reduce their chances of getting infected by using a condom, by avoiding people with STD symptoms, and by avoiding sexual contact with those who have many partners. Washing the genitals after sex, urinating after sex, and using a diaphragm with contraceptive foam, cream or jelly may also help. Persons with different partners should have regular STD check-ups.

HOW DOES SOMEONE RECOGNIZE AN STD INFECTION? Persons having sex, especially those with different partners, need to be alert for STD symptoms. STD symptoms may include (1) genital discharge, (2) abdominal pain, (3) pain during urination, (4) skin changes (i.e. rashes and blisters), and (5) genital itching. The symptoms are sometimes hidden. Many people with STDs have no symptoms. For some STDs, the symptoms disappear without the disease being treated. But, most STDs can be passed whether symptoms are present or not. Persons suspecting an STD should go to a doctor.

WHERE DO PEOPLE SEEK TREATMENT FOR AN STD? Persons who think they might have a sexually transmitted disease should not try to diagnose or treat their own condition. Only a doctor can do those things. Most STDs can be cured easily and quickly; however, there is no known cure at this time for genital herpes or AIDS. There may be no damage if an STD is treated soon enough. STD treatment is available from (1) STD clinics, (2) private doctors, (3) family planning clinics, and (4) hospitals. A person could call the health department to learn where STD treatment is given in his or her city, a county health department, or the state health department at (602) 230-5843. In every state, minors can get STD treatment without parental consent. Anyone being treated for an STD should follow the doctor's instructions.

ARIZONA RESIDENTS CASES AND RATES[1] OF SYPHILIS, GONORRHEA, AND ALL STD's[2] BY AGE, GENDER, AND COUNTY AND RATES[2] BY COUNTY[3], 1986

	SYPHILIS		GONORRHEA		ALL STD	
AGE	**N[3]**	**RATE**	**N**	**RATE**	**N**	**RATE**
0-14 Years	7	-	120	14.9	160	19.9
15-19 Years	64	26.0	1,830	744.4	2,444	944.2
20-24 Years	137	50.0	2,823	029.7	3,955	1,443.6
25-29 Years	141	44.2	1,674	525.1	2,369	743.2
30-34 Years	100	34.8	806	280.7	1,165	405.7
35-39 Years	72	28.8	366	146.6	555	222.3
40+ Years	176	15.0	411	35.1	704	60.0
GENDER	**N**	**RATE**	**N**	**RATE**	**N**	**RATE**
Males	415	25.1	4,999	302.7	6,234	377.5
Females	277	16.3	3,021	177.7	5,108	300.4
COUNTY[4]	**N**	**RATE**	**N**	**RATE**	**N**	**RATE**
Apache	49	81.0	383	633.1	452	747.1
Cochise	16	16.4	106	108.6	129	132.2
Coconino	34	38.2	209	235.0	471	529.5
Gila	14	35.3	28	70.5	103	259.4
Graham	7	28.5	15	61.1	49	199.7
Maricopa	314	16.4	5,206	272.3	7,139	373.5
Mohave	10	12.9	52	67.2	95	74.4
Navajo	72	97.3	349	471.8	618	835.4
Pima	80	12.4	1,222	190.0	1,586	246.7
Pinal	41	20.2	163	157.0	222	213.9
Santa Cruz	9	32.7	14	50.8	23	83.5
Yavapai	13	14.2	42	45.8	92	100.3
Yuma	29	33.0	135	153.5	224	254.7
TOTAL STATE	697	20.8	8,030	239.6	11,352	338.7

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1 Those sexually transmitted diseases which are reported.

2 Rates per 100,000 population.

3 Rates only calculated by county since out-of-state resident cases could be removed from county frequencies but not age or gender frequencies. Out-of-state cases comprise 2.2 percent of the cases in age and gender distributions.

4 A county is listed only if at least a total of 20 STD cases occurred.

This table was taken from Arizona Health Status and Vital Statistics, 1986, by the Arizona Department of Health Services, Office of Planning and Health Status Monitoring.

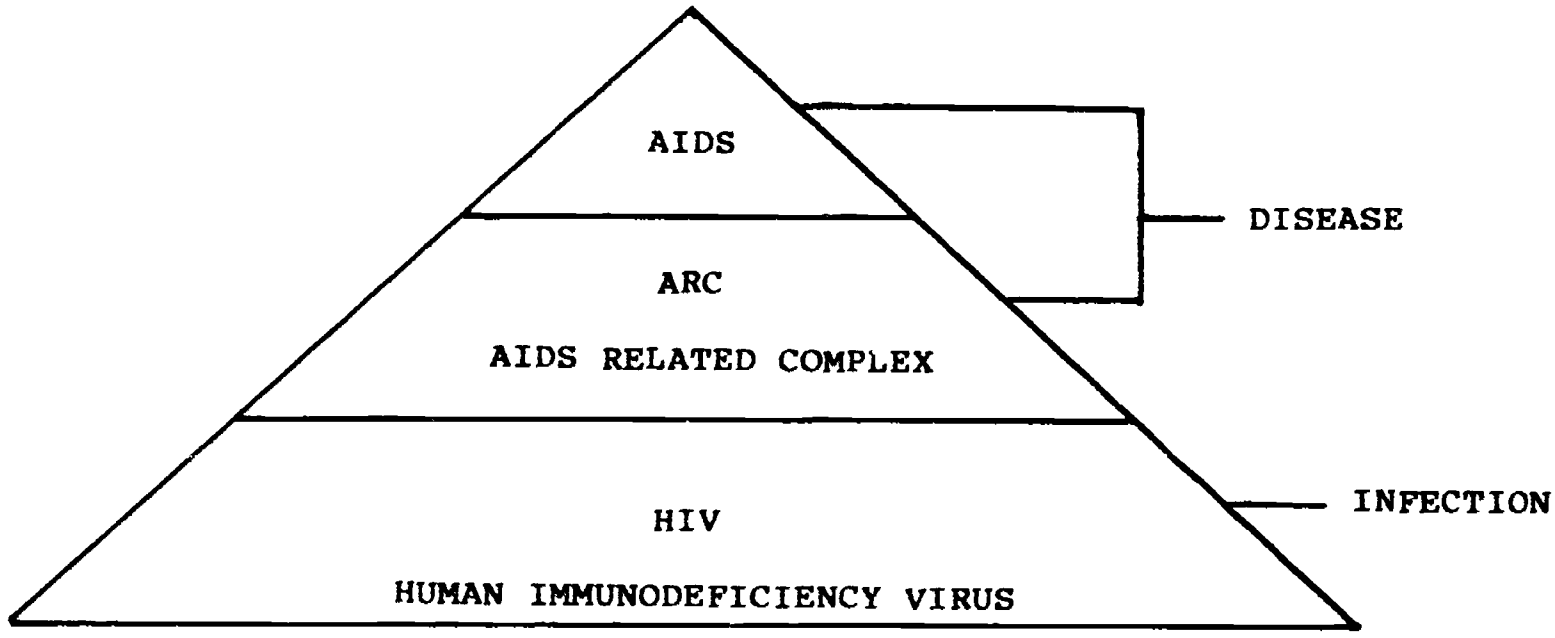
WHAT IS AIDS?

AIDS stands for:

Acquired	- something you get
Immune	- related to the body's ability to fight infections and diseases
Deficiency	- lack of something
Syndrome	- a set of symptoms or diseases that define a problem

Acquired Immunodeficiency Syndrome, or AIDS, is caused by the Human Immunodeficiency Virus (HIV) and is the most serious consequence of the infection of this virus.

AIDS Related Complex (ARC) is a condition caused by the HIV in which the individual tests positive for HIV and has a specific set of clinical symptoms that are often less severe than those of AIDS.



One to two million persons in the U.S. may have become infected with the AIDS virus. However, not all of these people have developed AIDS. Over 50 percent of those with AIDS have died. No one has recovered from AIDS. Some people infected with HIV will develop milder forms of disease (ARC). All of these people, at any stage of infection, are capable of spreading the infection.

DISCOVERING THE AIDS VIRUS

AIDS is best described as a detective story which began in our country in 1981. At that time, physicians in New York and in California became concerned about the occurrence of a rare form of cancer (called Kaposi's sarcoma) appearing suddenly in previously healthy young males. In addition, many of these young males were developing a form of pneumonia (called Pneumocystis carinii) seen only in persons whose immune system was not working well. The physicians treating these patients contacted the Centers for Disease Control of the Public Health Service and requested assistance in helping define what appeared to be a new medical condition. The investigators from the Centers for Disease Control gave the name AIDS to the condition affecting these young men.

It was clear that patients with these conditions had a deficiency in their immune system and that they were unable to fight off these infections. Physicians also observed that these patients did not recover from their illness. Very early in the investigations it was determined that these people did not die directly from a weak immune system, but from the fact that medicines were not effective in treating these rare conditions. The patient would, over time, develop cancer or infections that did not respond to treatment and death would follow.

Another major clue became apparent when the New York and California men were compared for similarity in lifestyle. The common link was that each patient who had a deficient immune system and the rare disease also engaged in a homosexual lifestyle. From this clue came evidence that suggested AIDS could result from practicing certain types of behavior, that it may be caused by a new virus and that if it was a virus, a blood test could be developed to tell if someone had been exposed to the virus.

Physicians became increasingly worried in the early years of the epidemic as cases began to occur in not only homosexual and bisexual men, but also in intravenous drug abusers and in people who had received blood transfusions or blood products. This suggested that whatever was causing this disease might be spread by contaminated blood or needles. Concern spread across the country about what was causing this illness, why certain groups were affected and others were not, and whether the nation's blood supply was safe.

In the quest for more answers about AIDS and its cause, it was critical for researchers to launch a massive effort to discover what was causing the deficiency in a person's immune system and resulting in rare infections. Researchers, early in 1982, both in the United States and France, began the frantic search to discover the cause. Since it was known that this disease adversely affected the immune system, researchers concentrated on comparing cells and tissues from infected persons with those of healthy persons. In 1983, after an exhaustive search, a new virus was discovered. This virus has had many names attributable to the researchers who discovered it, but it is now known as the Human Immunodeficiency Virus (HIV).

After discovering the virus, it was possible to isolate the virus in different types of body fluids. The virus was found in high concentrations in the semen and blood of infected individuals. This helped confirm how the virus was being spread.

Immediately after discovery of the virus, researchers began efforts to develop a blood test which could detect whether or not a person had been exposed to and infected with HIV. By 1984, researchers developed two tests which, when both were positive, would confirm that a person was infected with the virus. These tests indicate that antibodies to the virus are present in the blood. HIV anitbodies develop after the virus has infected a person and their immune system has begun to fight the virus by producing antibodies. These two tests are called the ELISA (Enzyme-Linked Immunosorbent Assay), a blood screening test, and a more specific antibody test known as the Western Blot. By Summer, 1985, the ELISA test was implemented nationally to protect the nations blood supply.

The importance of the discovery of a blood test which would tell physicians whether or not a person is infected can not be overemphasized. Since cases of AIDS continued to occur in epidemic proportions in homosexual men and intravenous drug abusers (IVDA), this test provided an important tool for physicians to limit the spread of HIV.

Beginning in March 1985, all donated blood at blood donation centers began to be tested to determine the presence of antibody to HIV. To discourage individuals at risk for this infection (homosexual/bisexual men and IVDAs) from continuing to donate blood, alternate testing facilities were established to protect the blood supply and at the same time allow individuals at risk to determine whether or not they were infected. Therefore, individuals wishing to be tested for HIV could do so without using blood donation sites.

Even while the virus was being discovered and the test was being developed, the mystery of AIDS continued to baffle physicians and researchers. Using epidemiology (the scientific study of the occurrence and distribution of disease in the population) physicians and public health workers observed that not all people infected with the virus were developing AIDS. Most, in fact, remained healthy, some developing AIDS Related Complex and some developing AIDS. They further observed that regardless of what stage of illness an individual had, each person infected was potentially capable of transmitting the virus either through sexual contact, blood to blood exposure, or from an infected pregnant woman to her unborn child or during childbirth.

Careful studies by researchers using the antibody test, epidemiology, and observing this epidemic over time have given us important answers and knowledge about AIDS.

AIDS SUMMARY SHEET

WHAT IS AIDS? AIDS is caused by the Human Immunodeficiency Virus which weakens the immune system. The infected person may develop problems in fighting certain infections. The opportunistic diseases acquired, not the AIDS virus, usually kill the infected person. It is not known for sure what percent of persons infected with the AIDS virus will actually develop AIDS or become ill. The virus can be transmitted soon after the person becomes infected. This is true even if the person does not develop AIDS.

WHAT IS THE COURSE OF THE DISEASE? Once exposed to the virus, it usually takes 2 weeks to 6 months to develop antibodies that will be detectable on a blood test for HIV. Once infected, a person can either remain healthy, develop some symptoms called AIDS Related Complex (ARC), or go on to develop the full disease AIDS. It may take years between infection and development of AIDS. Meanwhile, the mortality rate for AIDS is virtually 100 percent; over half the recorded victims of the disease are already dead. It is estimated that within 2 to 3 years after diagnosis of AIDS, 75 to 80% of those infected will die.

HOW IS THE AIDS VIRUS TRANSMITTED? The AIDS virus is present in semen and blood. The AIDS virus is not highly contagious. It is transmitted primarily by sexual contact and sharing IV drug needles and syringes. The virus can also be passed from a woman to her fetus or newborn child. Anyone, heterosexual, homosexual, or bisexual engaging in risky sexual or drug-abusing behaviors with an infected person can get the AIDS virus.

Currently in the U.S., over 95% of the AIDS cases have been: homosexual and bisexual men; heterosexual IV drug abusers; heterosexual sex partners of persons with AIDS; and recipients of transfused blood or blood-clotting factor. In Africa, a large portion of cases appear among heterosexuals. Most experts believe that the percentage of infected heterosexual men and women will increase in the U.S.

The AIDS virus is not spread by casual, social, or family contact. One cannot get the virus by touching or being near a person with AIDS.

HOW IS AIDS DIAGNOSED? A person should be concerned about being infected with the AIDS virus if one is a member of a high-risk group or has sex with a person who is. There is now a test for antibodies to the AIDS virus. Positive test results mean that the person has been infected with the virus. But, the person may not have or ever develop AIDS. The development of certain serious illnesses is how doctors determine if a person has AIDS. The test is mainly used to screen blood, semen, and organs. High-risk persons should consider taking the test. Local or state health departments provide confidential testing for all persons, including teenagers, at AIDS counseling and testing sites.

The incubation period for AIDS ranges from a few months to many years. Symptoms of infection with the AIDS virus include tiredness, fever, loss of appetite and weight, diarrhea, night sweats, and swollen lymph glands. Only a physician can diagnose AIDS.

HOW IS AIDS PREVENTED? Abstinence from sexual intercourse and IV drug abuse is the only sure way to prevent infection with HIV. If people decide to be sexually active or use drugs, there are several things that can be done to reduce the risk of infection:

1. Use latex condoms (rubbers) and a spermicide.

2. Do not have sex with different partners.

3. Do not use needles or syringes that have been used by others.

DEVELOPING AN AIDS CURRICULUM

GOAL OF AIDS EDUCATION

AIDS has become one of the world's most serious health problems. The number of cases is increasing in the United States and many nations of the world. The Surgeon General, C. Everett Koop, has said, "In the absence of a vaccine or any miracle drug to stop AIDS, the best thing society can do to contain this epidemic is to present scientifically accurate and personally sensitive information about AIDS to our children."

Because of the present lack of a medical solution to AIDS, prevention and education have been identified as the strategies for controlling AIDS. The condition is preventable, and students must be informed about behaviors that increase the risk of infection and motivated to avoid such behaviors. Since school attendance is the universal experience of young people, AIDS education in the classroom is a necessary and valuable method for promoting preventive behaviors. Proper education about AIDS in the school setting must reach the young adult before risky health habits that might lead to HIV transmission are adopted or firmly established.

Education about AIDS, like instruction concerning STDs, should prepare individuals to protect themselves and others from infection. That is, following instruction about AIDS, students should act more responsibly and make decisions that will contribute to their health and well-being.

1. Accurate and Relevant Knowledge

Many previous STD curricula have emphasized the biomedical aspects of the diseases. Less attention was given to the health behaviors. Most of the medical facts are not relevant to providing students the knowledge needed to avoid infection. The current philosophy of STD and AIDS education emphasizes information about how to avoid infections with the germs that cause the diseases, what to do once an infection or disease is suspected/diagnosed, and what can be done to help stop its spread.

For AIDS instruction in particular, emphasis should be placed on the personal behaviors that put a person at risk for acquiring the AIDS virus and that help one avoid infection. Attention should not be on the high-risk groups, per se. For example, students should be informed that exposure to the virus results from practicing risky sex and IV drug behaviors, and not from a particular sexual orientation, such as homosexuality. In addition, suggestions for preventing exposure to the virus should be simple and direct since the virus is spread only in limited ways and certain behavior modifications are necessary to prevent infection.

AIDS education also should discuss the dangers of having the virus and dispel myths about how the virus is passed. Misunderstanding about the contagion and methods of transmitting the AIDS virus has led to unnecessary alarm and fear about AIDS.

2. Attitudes Conducive to Health Promotion

Attitudes have a strong influence on an individual's health behavior. This is particularly true about AIDS and STDs because of the negative social attitudes many people have developed toward these diseases.

Education about AIDS should be directed toward student acceptance of the possibility of exposure to the virus and the need to practice preventive behaviors. AIDS education also needs to emphasize a mature attitude in assuming a responsibility for the health of others.

3. Skills

Instruction should provide as much rehearsal as possible of AIDS prevention behaviors. Since most of the behaviors cannot be actually practiced in the classroom, exercises involving related behaviors or simulation of behaviors can be conducted. For example, decision-making and problem-solving relative to AIDS situations can be practiced.

IMPLEMENTING AN AIDS EDUCATION CURRICULUM

Four major areas should be addressed before implementing a program. Attention to instructor qualities and learning environment, resources, community involvement, and coordination of curriculum with existing STD education will enhance the effectiveness of AIDS education.

1. Teacher Characteristics and Learning Environment

The teacher should be able to create a "safe" environment in which students can discuss the topic freely. Further, the teacher should be able to lead group activities, and be able to communicate with students with ease, sensitivity, tact, and in an objective, unbiased manner.

2. Resources

New information concerning the medical and social aspects of AIDS appears almost daily. Even though the health behaviors related to AIDS are not likely to change, new scientific data may become available, and the instructor should keep current. Up-to-date information is available from the Department of Health Services, (602) 230-5843, or the National AIDS Hotline, 1-800-342-AIDS. A resource section has also been included in this document.

3. Community Involvement

Most communities have a strong interest in school education about AIDS. They generally support instruction, but are often concerned about the exact nature of the course content. This program was written to be accepted by a broad spectrum of communities. Deliberate efforts were made to discuss the material discretely and tactfully, as well as to be scientifically objective. It is necessary that the curriculum be discussed with representatives of the local community. Typically for the STD instructional area, community involvement in the curriculum process leads to strong support for teaching the subject. Students should be encouraged to share their AIDS materials with parents. Sharing can address some of the concerns, fears, and questions that parents may have. District parent meetings should be held for parental input and community support.

4. Coordination of Curriculum with Existing STD Education

Even though AIDS is very serious, AIDS education should be complemented with other STD instruction. A student is much more likely to be affected by an STD other than AIDS. Nearly one-half, or ten million, of those infected by an STD are under age 25. This fact can be used to demonstrate the extent to which AIDS-related, high risk behaviors are practiced by young adults.

CONCERNS AFFECTING AIDS EDUCATION

Discuss with students that there are two epidemics, AIDS, which has been described, and an additional epidemic of fear and misunderstanding called AFRAIDS.

The reluctance to talk about AIDS in many ways may have contributed to the spread of the virus. Information and education programs have not been made available until recently. The unwillingness of some people to discuss this topic openly and frankly has led to many misconceptions. One major step in stopping the spread of AIDS is providing a clear accurate message on what AIDS is, how it is and is not spread, and how it can be prevented.

AIDS is a disease that frightens many people. The irrational fear of AIDS has been called AFRAIDS, and only information and education can help people to deal with this fear.

Many people still have concerns that AIDS is contracted by casual contact. Studies of families of AIDS patients have clearly shown that AIDS has not been spread in normal family, school, work or social situations.

Another concern that many people have comes from the fact that the AIDS virus has been found in body fluids such as tears, saliva, sweat and urine. Although research has found the virus in these body fluids of some AIDS patients, the virus particle count is very low. Furthermore, there are no substantiated cases of the AIDS virus being transmitted on water glasses, on toilet seats, by sneezes or coughs, etc.

The Human Immunodeficiency Virus is primarily spread from infected persons either during intimate sexual contact or by introduction of infected blood (or blood products) into the bloodstream which may occur in IV drug abuse, blood transfusion, or treatment of hemophilia. In addition, it can spread from an infected mother to her unborn child or during childbirth.

More has been learned about AIDS in a shorter amount of time than any other disease ever encountered. From a new disease about which nothing was known in 1981, we have:

defined the disease,
found the cause,
established tests and control programs,
learned how to prevent the spread of the AIDS virus,and
developed drugs that may prolong the life of an infected individual.

Much still needs to be done but more is being learned about this epidemic every day.

Currently, in reported cases in the USA, the groups most affected by AIDS are:

homosexual or bisexual males,
IV drug abusers,
hemophiliacs,
sexual partners of members of risk groups,
blood and organ recipients, and
other.

When this disease was first identified, it was classified by the specific diseases that were associated with it (Kaposi's sarcoma and Pneumocystis carinii pneumonia). As more was learned about AIDS it was identified by the group that is most affected. With a better understanding of the disease, who it affects and how it is spread, it is clear that AIDS is a disease of certain behaviors.

There are carriers of the AIDS virus who appear healthy and don't know they are infected. Since it is impossible to know who has the virus and who doesn't, people need to protect themselves and take precautions.

It only makes common sense that if people don't have sex or abuse drugs they won't get AIDS. Abstinence is the only absolutely sure method of preventing infection with HIV

If teens are not involved in high risk behaviors, they shouldn't start. It's not worth the risk. If they are involved in high risk behaviors, they should stop the activity or take precautions to reduce the risk.

ANSWERS TO COMMON QUESTIONS ASKED BY STUDENTS

Below are questions about AIDS asked by students. Even though all of the possible aspects of AIDS may not be represented, many of the important concerns of students are addressed. Answers are given to assist the teacher in responding to similar questions from students. The questions have been grouped into seven categories: (1) The AIDS Epidemic; (2) What Is AIDS?; (3) AIDS Virus Infection; (4) AIDS Virus Transmission; (5) AIDS Virus Prevention; (6) AIDS Treatment; and (7) AIDS Social Issues.

Students may have some questions which they feel uncomfortable asking in front of their peers. The teacher can provide a question box in the room that would allow students to ask questions anonymously. If this technique is used, inform students that all questions asked in good taste will be answered.

THE AIDS EPIDEMIC

1. How many people in the U.S. and the world have AIDS?

It is estimated that one to two million persons in the U.S. are infected with the AIDS virus, with only a fraction actually having developed AIDS. Approximately five to ten million persons globally may be infected.

2. How and when did AIDS start?

It is not known for sure how or when AIDS started. Some experts believe that it originated in Africa in the 1970's. Others disagree with this view. AIDS was first reccognized in the U.S. in 1981.

3. Was AIDS caused by homosexuals?

No. Homosexual and bisexual males comprise about 74 percent of the AIDS cases in the U.S. Their large percentage is attributed to the fact that many of these persons had many sexual partners and practiced sexual behavior that places one at greater risk for contracting the AIDS virus. Some of the infected homosexual and heterosexual males also abused IV drugs. Anyone, heterosexual, homosexual, or bisexual who engages in risky sexual or IV drug-abusing behaviors can acquire the AIDS virus. It is the risky behaviors, not one's sexual orientation, that places the person at risk.

4. How many women have AIDS?

Presently in the U.S., about seven percent of the AIDS cases are women. About one-half of these acquired the virus from IV drug abuse. Others got the virus from heterosexual contact with an infected person, or via blood transfusions. It is predicted that the number of women with AIDS will increase. In many central African countries there are nearly equal numbers of females and males with AIDS.

5. Does AIDS affect all races of people?

Yes. Anyone, regardless of race, can acquire the AIDS virus if the individual participates in risky sexual and IV drug-abusing behaviors with an infected person. Minorities however, in certain areas of the country, are developing AIDS at a higher rate.

6. Can all ages get the AIDS virus?

Yes. Persons of all ages can acquire the virus if exposed to risky behavior. Even children, who comprise about one percent of the AIDS cases, can get the virus. The majority of children acquired the virus from an infected mother during pregnancy or childbirth. A few children became infected from blood transfusions prior to the screening of blood.

7. Will AIDS take over the world?

The virus is difficult to transmit; it is not passed by casual contact such as being around an infected person. Persons who know how to protect themselves can reduce the risks of infection. Even though it does not appear that a cure or vaccine will be available in the near future, the knowledge to prevent AIDS is available now.

WHAT IS AIDS?

1. What causes AIDS?

AIDS is the end result of an infection caused by a virus. The virus has been given different names, however, the term Human Immunodeficiency Virus, or HIV, is now the recognized name.

2. Are there different types of AIDS?

There are different stages of the AIDS virus infection that occur before one could actually develop AIDS. This information may have caused people to believe that there are different types of AIDS. However, there are other viruses being identified around the world which may relate to AIDS, such as HIV-II.

3. Is AIDS like other diseases?

AIDS is not like some communicable diseases, such as the cold, flu, or measles that can be passed through casual contact like sneezing, coughing, or sharing of eating utensils. There are no known cases where AIDS was passed by those means.

4. What is a high risk group?

High risk groups refer to the grouping of all AIDS cases into categories that represent how individuals probably get infected with the AIDS virus based on behavior or specific exposure. At this time in the U.S. high risk groups include: homosexual and bisexual men; IV drug abusers; heterosexual sex partners of persons with AIDS or at risk for AIDS; and recipients of contaminated blood or blood clotting factors. In general, persons in these groups are more likely to be exposed to the AIDS virus.

5. Can you carry the virus and not develop AIDS?

Yes. Many people carrying the AIDS virus have not developed AIDS and may not know they are infected until the symptoms of an acquired or "opportunistic" disease (Kaposi's sarcoma or Pneumocystis carinii pneumonia) develop. However, persons with the virus can transmit it to others even if symptoms do not develop.

AIDS VIRUS INFECTION

1. How long is the incubation period for AIDS?

The time between acquiring the virus and having symptoms, called incubation period, ranges from a few months to several years or more.

2. What are the common symptoms of AIDS?

Symptoms of persons infected with the AIDS virus include: tiredness, fever, loss of appetite and weight, diarrhea, night sweats and swollen lymph glands lasting one month or more. The symptoms may indicate an AIDS infection. Many other illnesses also have these symptoms. Only a physician can diagnose the condition.

3. How long can a person lead a normal life after developing AIDS?

Many persons who develop AIDS respond differently. Some persons are very ill throughout the course of the condition. Most die within two years. Some remain in good physical condition, or have alternating periods of health and illness for several years. Eventually, all persons who develop AIDS die from complications associated with the disease.

4. Why does a person die from AIDS and how long does it take?

Some people with the AIDS virus, because their immune system has been weakened, acquire illnesses (opportunistic diseases) that are not usually caught by healthy people. The persons die from these diseases, not usually from the AIDS virus. About 80 percent of people with AIDS have died within two to three years after developing AIDS.

5. Does anyone ever survive AIDS?

To date, there is no cure for AIDS.

6. Can you tell if someone has the AIDS virus?

One cannot determine if another individual is infected with the AIDS virus from the person's appearance.

7. Is there an AIDS test?

There are two tests available that determine if a person has antibodies or has been exposed to the AIDS virus. These . called the ELISA, a blood screening antibody test, and a more specific antibody test called the Western Blot. The Western Blot is used to confirm positive ELISA results. However, the presence of the antibodies does not mean that the person has or will develop AIDS.

8. Is the AIDS antibody test sometimes wrong?

Yes. Even though the test is very accurate, it is not perfect. Sometimes, the test results may be positive when there are no antibodies present (called false positive). Because of this, every positive ELISA test is repeated before being judged as positive. Repeatedly positive ELISA tests are confirmed by the use of Western Blot tests. Only when the ELISA and the Western Blot tests are positive is the person informed he/she is infected. Almost all false positives are excluded by this process. Also, on rare occasions, an infected person may test negative (called false negative).

AIDS VIRUS TRANSMISSION

1. How do people get the AIDS virus?

The AIDS virus is present in certain body fluids, mainly semen and blood. The virus is transmitted during sex, by sharing IV drug needles or syringes, from contaminated blood, and from an infected woman to her fetus or newborn child.

2. How contagious is the AIDS virus?

The AIDS virus is hard to transmit. It is not very contagious. In comparison to other communicable diseases, the AIDS virus is much less contagious than germs that cause the common cold, flu, measles, or tuberculosis. AIDS is not spread through the air or by casual contact.

3. Can you get the AIDS virus from blood transfusions?

In the U.S., the risk of contracting the AIDS virus from blood transfusions is very low. Medical experts estimate that in the U.S., the risk of contracting the AIDS virus from blood transfusions is about one in a million. Since 1985, donated blood is screened by a test that detects the AIDS antibody. Any blood having the antibodies is not used for transfusion.

4. Can you get the AIDS virus from casual contact?

No one should be afraid of getting the AIDS virus by casual, social, or family contact. People can, for example, work with others, attend school and public events, eat at restaurants, and be around members of high-risk groups without the fear of getting the AIDS virus. Persons caring for another family member who has AIDS are also not at increased risk for contracting the virus. Children attending school with another student having the AIDS virus are not at risk of becoming infected.

5. Can you get the AIDS virus from kissing?

The AIDS virus has rarely been found in human saliva and tears. Even then, only very small amounts of the virus have been found. This is one of the reasons there have been no confirmed cases where the virus was passed through these fluids, such as by kissing.

6. Is AIDS an inherited disease?

No. The AIDS virus is not passed genetically from generation to generation.

7. Can a man transmit the AIDS virus to a woman?

Yes. Any woman who participates in intercourse with an infected male is at risk for acquiring the AIDS virus.

8. Can a woman transmit the AIDS virus to a man?

Yes. Male sexual partners of an infected woman have become infected with the AIDS virus. Clearly, the AIDS virus can be transmitted from woman to man, but scientists do not know if it can be passed quite as easily as it can from man to woman.

9. Can the AIDS virus be passed by mosquitoes?

Research does not indicate that insects are capable of transmitting the virus or have ever done so.

10. Are married people at risk?

A married couple who both practice sexual fidelity have virtually no risk of acquiring the AIDS virus, unless one partner has the virus at the start of marriage, or engages in high risk behaviors.

11. Can someone with the AIDS virus have sex without passing it to others?

Maybe. But the percentage of times the virus would not be passed is not known. It also cannot be determined which exposure would result in infection and which exposure would not. Hence, every sexual contact with an infected person should be considered as possibly resulting in the virus being transmitted.

12. Is there a danger of contracting AIDS from donating blood?

No. Blood banks and other blood collection centers use sterile equipment and disposable needles. The need for blood is constant, and people who are not at increased risk for AIDS are urged to continue to donate blood as they have in the past.

AIDS VIRUS PREVENTION

1. If there is no cure for AIDS, what is being done to prevent its spread?

Besides major efforts being presently directed toward developing treatments and a vaccine, educational programs are being given to high risk groups and the general public. These programs attempt to motivate persons to practice avoiding high risk behaviors. Even if a medical solution to AIDS were available, preventive education would still be considered the best way to control the virus.

2. What can an individual do to keep from getting the AIDS virus?

Persons can reduce their risk of contracting the AIDS virus by doing certain things related to sexual expression and drug abuse. The sexual precautions include (1) sexual abstinence, (2) sexual fidelity, (3) avoiding exchange of body fluids by using a condom and spermicide, and (4) avoiding sexual partners who are in the high risk groups. These precautions can also help reduce the risk of contracting other STDs. Concerning drug abuse, no one should share IV drug needles and syringes, although not using IV drugs at all is the best approach.

AIDS TREATMENT

1. Can AIDS be cured?

No. Currently there are no drugs available that will completely destroy the AIDS virus or restore the immune system once it is damaged. One drug, azidothymidine (AZT) that seems to control the growth of the AIDS virus, has prolonged the lives of AIDS patients in an experimental trial. AZT has recently been made available to many persons with AIDS.

2. Will there be a cure for AIDS in the near future?

Even though the search for effective treatments is being pursued vigorously worldwide, their discovery is not expected soon. There seems to be some progress in developing treatments for the "opportunistic diseases", but there are many obstacles to overcome in developing a drug that can destroy all the AIDS virus in a person.

3. What is being done for people who develop AIDS?

Persons with AIDS need both medical and social support services to help them cope and live with their condition. This type of assistance is increasingly available, although there is more that can be done. Also, family members need support. Legal efforts are being pursued to protect the rights of persons with AIDS.

4. Is there a vaccine to prevent AIDS?

No. Scientists are striving to develop a vaccine, but a solution appears to be several years away. However, millions of dollars are being spent on research to develop a vaccine for this disease.

AIDS SOCIAL ISSUE

1. How should people with AIDS be treated?

Persons with AIDS should have equal access to medical and social services, employment, housing, and educational opportunities. They also need emotional understanding and support from friends and the community.

2. Should a student with AIDS be allowed in school?

Yes. A student with AIDS or having the AIDS virus poses no risk to other students. However, there may be times when the person with AIDS should not attend school because of his/her weakened condition. This weakened condition may place the student at risk for infection with other diseases.

3. Should persons with AIDS be banned from public events, schools and jobs?

No. Since the AIDS virus cannot be passed by casual contact, there is no reason why persons with AIDS should be kept from being a participating member of the community.

5. Where can I get more information about AIDS?

A school or community library may be able to provide information about AIDS, although the latest information is probably available from a physician, STD clinic, a local health department, or the state health department at (602) 230-5843. One could also call a local AIDS telephone hotline or the AIDS National Hotline (1-800-342-AIDS), which is funded by the Centers for Disease Control. A resource section has been included in the Program.

GLOSSARY

Abstinence	Refraining from sexual intercourse and IV drug use.
Acquired Immune Deficiency Syndrome	A disease caused by the HIV virus which breaks down the body's immune system, making it vulnerable to opportunistic diseases.
Adolescence	The period between childhood and adulthood.
AIDS	The initials for the disease "Acquired Immune Deficiency Syndrome".
AIDS Related Complex	A condition caused by the HIV in which an individual tests positive for HIV and has a specific set of clinical symptoms that are often less severe than those of AIDS.
AIDS Virus (HIV) Test	A test used to detect antibodies against the AIDS virus (HIV) in blood samples. This test does not detect AIDS but rather the virus that can cause AIDS.
Antibodies	Substances in the blood produced by the body's immune system to fight against invading organisms.
Antigen	A substance that stimulates the production of antibodies.
ARC	The initials for "AIDS Related Complex".
' vmptomatic	No apparent symptoms of illness even though the individual tests positive for HIV.
Bisexual	A person who has sexual preference for both males and females.
Blood Transfer	The act of transmitting blood from one individual to another. In pregnancy, it would occur between the mother and unborn baby through maternal/fetal circulation.

Carrier	A person who harbors a specific infectious agent, in the absence of clinical disease, and serves as a potential source of infection.
Casual Contact	The usual daily interaction between people at work, in school or in social situations.
Communicable Disease	A disease which may be transmitted directly or indirectly from one person to another. Such diseases may be caused by bacteria, viruses, or other organisms or their toxic products.
Condom	Also referred to as a "rubber". A sheath used to cover the penis and prevent the exchange of body fluids during sexual activity.
Contaminated Needle/Works	A needle or works that has been used, with infected blood or blood particles left on the needle/works to be passed on to the next user.
Droplet Spray	Organisms that are projected in droplets of water when an infected person coughs or sneezes and are received in the ey nose or mouth of a nearby person.
ELISA	The initials for "Enzyme-linked Immunosorbent Assay".
Enzyme-linked Immunosorbent Assay	A test used in screening blood to determine the presence of HIV antibodies.
Epidemic	An increased occurrence of a disease in excess of what is expected.
Epidemiology	Branch of medical science which investigates the cause of epidemics and determines methods to control them.
Fetus	Unborn baby developing in the uterus after the end of the second month of pregnancy. Before eight weeks it is called an embryo.
Genitals	The external reproductive organs.

Hemophilia	A hereditary clotting disorder characterized by excessive, sometimes spontaneous, bleeding.
Heterosexual	A person who has sexual preference for a person of the opposite sex.
HIV	Initials for "Human Immunodeficiency Virus".
Homosexual	A person who has sexual preference for a person of the same sex.
Host	Any person in whom an infectious agent can live and multiply.
Human Immunodeficiency Virus	The virus that causes AIDS by attacking the body's immune system, making infected people vulnerable to fatal infections, cancer, and neurological disorders.
Illegal Drugs	Drugs that are not obtained through legal means or for legitimate medical purposes.
Immune System	A body system that helps fight off invading organisms and disease.
Immunization	A method of producing resistance to an infectious disease, usually by vaccination or inoculation.
Incubation Period	The time interval between invasion by an infectious agent and appearance of the first sign or symptom of the disease in question.
Infected Partner	Individual in a sexual relationship who is carrying the AIDS virus (HIV) in his/her body.
Infectious Agent	An organism (virus, bacterium, etc.) that is capable of producing infection or infectious disease.
Infectious Disease	Disease caused by a pathogen and passed from one person to another.
Intravenous Drugs	Drugs that are administered through a needle and syringe and injected directly into a vein and thus into the bloodstream.

Kaposi's sarcoma	A cancer or tumor of the blood and/or lymphatic vessel walls. It usually appears as blue violet to brownish skin blotches or bumps.
KS	Initials for "Kaposi's sarcoma".
Lymphocyte	A type of white blood cell that is produced in the bone marrow. Some of these cells migrate to the thymus, where they develop as T-cells. Other lymphocytes that mature in the bone marrow or in organs other than the thymus are called B-cells. The B-cells manufacture antibodies, and the T-cells regulate antibody production. In healthy people about 60 percent of circulating lymphocytes are helper T-cells. With AIDS, only about two percent of the lymphocytes are helper T-cells. With fewer helper T-cells, the body is unable to recognize and attack invading organisms.
Noncommunicable Disease	A disease that is NOT transmitted from person to person.
Opportunistic Infection	An infection caused by a microorganism that rarely causes disease in persons with a normal immune system.
Organism	Any living thing, such as a virus, a bacterium, etc.
Pathogen	An organism that causes disease.
PCP	The initials for "Pneumocystis carinii pneumonia".
Pneumocystis carinii pneumonia	The most common life-threatening opportunistic infection diagnosed in AIDS patients. It is caused by a parasite, Pneumocystis carinii.
Pregnancy	The condition of having a developing embryo or fetus in the body.
PWA	Abbreviation used for People With AIDS.
Risk Behavior	An activity that makes a person more susceptible or more likely to be exposed to the AIDS virus (HIV).

Screened Blood	Blood that has been tested for HIV antibody.
Semen	The fluid that is expelled from the penis during sexual activity.
Spectrum	A range of factors associated with HIV infection or a range of outcomes.
Susceptible Host	A person not possessing sufficient resistance against a particular organism to prevent contracting the infection when exposed to the organism.
T-Cells	A class of lymphocytes that play a major role in carrying out the activities of immune system. Some T-cells are called "helper T-cells".
Transfusion	The process used to replace blood or blood products.
Transmission	The passing of infectious agents from one person to another.
Virus	A microscopic organism that can cause infections.
Western Blot	A test used to identify the presence of the AIDS virus.

RECOMMENDED SAMPLE LETTER TO PARENTS/GUARDIANS

Dear Parents/Guardians:

The administrators and teachers of the _____ School District recognize the need to assume a key role in teaching students about Acquired Immunodeficiency Syndrome (AIDS) and how to avoid contracting this deadly disease.

Your child will have the opportunity to receive instruction about AIDS this semester. Parents/Guardians are encouraged to review the actual lessons to be taught and may do so at their child's school by contacting the principal. This instruction will include the following topics by grade level:

K-3
- Distinguishing between communicable and noncommunicable disease (this includes AIDS, allergies, diabetes, cold, strep throat, asthma, heart disease, flu and chicken pox)
- Healthful lifestyles
- Community health resources

4-5
- Distinguishing between communicable and noncommunicable disease (this includes AIDS, allergies, diabetes, cold, strep throat, asthma, heart disease, flu and chicken pox)
- What AIDS is
- Symptoms of AIDS
- Behaviors that lead to healthful lifestyles
- How AIDS can be prevented

6-12
- Recognizing the AIDS problem
- Signs, symptoms and methods of transmission of AIDS
- Community resources
- Personal and social responsibility in the prevention and control of AIDS
- Human concerns related to AIDS
- How AIDS and other sexually transmitted diseases are contracted

Please complete the form attached to this notice and return it to the teacher. If this form is not returned, your child will NOT receive lessons in AIDS education.

Thank you,

_____ _____

Teacher's Signature Date

RECOMMENDED SAMPLE FORM FOR PARENTAL/GUARDIAN PERMISSION

☐ Yes, my son/daughter _____ has permission to attend lessons in AIDS education.

☐ No, my son/daughter _____ does not have permission to attend lessons in AIDS education.

_____ _____

Parent/Guardian Signature Date

AIDS EDUCATION PROGRAM

AIDS EDUCATION PROGRAM

GRADES K-3

Information about AIDS could be incorporated in a broader curriculum on body appreciation, wellness, sickness, friendships, assertiveness, family roles and different types of families.

AIDS should be defined simply as a very serious disease. Students should be told that young children rarely get it and they do not need to worry about playing with children who have AIDS or whose parents have AIDS.

Questions should be answered directly and simply; responses should be limited to questions asked.

Assertiveness in refusing unwanted touching should be taught.

The activities beginning on page 39 are provided to assist you in the development of an AIDS education curriculum.

1. Concept:

There are some diseases that are communicable diseases.

Objectives:

To distinguish between communicable and noncommunicable diseases.

To understand how communicable diseases are transmitted.

Suggested Discussion/Activities:

Discuss diseases that students may be familiar with, such as:

- AIDS
- allergies
- diabetes
- cold
- strep throat
- asthma
- heart disease
- flu
- chicken pox

Help students identify what a disease is.

Define what communicable disease means.

Create a chart showing which diseases are communicable.

Have students decide what steps they can take to promote health, such as:

- proper rest
- proper eating habits
- activity

Students will identify what causes communicable diseases:

- viruses
- bacteria
- fungi

Students will discuss ways in which each of the diseases can be transmitted:

- contact with an infected person
- droplet spray

Students will decide on ways to prevent spread of communicable diseases, such as:

washing hands
covering the mouth when sneezing or coughing
being immunized

2. Concept:

There are skills to practice which will lead to a healthful lifestyle.

Objective:

To understand and practice good health habits.

To demonstrate personal safety skills.

To show an appreciation of one's own uniqueness and the uniqueness of others.

To recognize choices and their consequences.

To understand how family members show care and help one another.

Suggested Discussion/Activities:

Create a record of activities that contribute to personal health.

List activities that contribute to personal health, such as:

washing hands
brushing and flossing teeth
exercise
rest and sleep
recreation, fun
making wise food choices
expressing feelings, i.e. laughing and crying
fostering relationships with family and friends, i.e. playing, sharing thoughts and feelings

Students will make a collage of good health practices.

Students will identify health practices on the collage.

Discuss with the class why rules exist.

Identify rules students must obey, such as:

traffic rules
school rules

Identify and list rules of body safety. Provide situations which students can role-play, such as:

say no
get away
tell someone

Help students to list three people they can go to for help, such as:

parent, guardian
teacher
school nurse

Create a bulletin board illustrating different people engaging in a variety of activities.

Discuss the similarities and differences illustrated on the bulletin board:

physical characteristics
behavior
talents
feeling responses to situations

Identify that students share some of these characteristics with others.

Discuss what it feels like to be different.

Have students discuss how they can help each other to accept themselves.

Have students practice behaviors that demonstrate respect for their own uniqueness and that of others, such as:

acceptance of physical characteristics
recognition of talents
acceptance of feelings

Develop a family album that will define family roles and activities.

Identify family members and discuss the activities of family members.

Students will show care and help family members. Some of these behaviors might include:

helping with chores
helping at mealtime
playing with a sibling
caring for one's belongings
helping to care for family pet
spending time together
recognizing feelings by listening and responding

Have students role-play situations in which family members show care and responsibility for one another.

Students will decide how family members show care and help one another at special times, such as:

when someone has done something well
when someone is sad
when someone is sick
holidays
family gatherings

3. Concept:

There are community resources for information, help, and counseling.

Objective:

Know and use appropriate health resources.

Suggested Discussion/Activities:

Create a booklet of health resources.

Identify persons who can help in the:

home
school
community
religious organization

AIDS EDUCATION PROGRAM

GRADES 4 - 5

AIDS EDUCATION PROGRAM

GRADES 4-5

Information about AIDS could be incorporated into a broader curriculum which includes body appreciation, wellness, sickness, basic human sexuality, friendships, assertiveness, family roles and different types of families. Concepts in the K-3 program may be used.

The activities beginning on page 39 are provided to assist you in the development of an AIDS education curriculum.

1. Concept:

Communicable diseases are illnesses in which the major cause is a disease producing organism.

Objective:

To distinguish between disease caused by microorganisms and those caused by other factors.

To understand the infectious disease cycle or "chain of infection".

Suggested Discussion/Activities:

Discuss when the body has AIDS it can no longer fight off microorganisms usually found in the environment.

Discuss what happens to bacteria in the body and how it is fought.

Using a handwashing demonstration, demonstrate bacteria samplings of a dirty hand and a well washed hand.

List and explain the body's defense against invasion by pathogens.

Discuss other concepts such as catching, spreading and transmitting communicable diseases.

Discuss how to break the cycle of infection.

Ask students to identify some of the illnesses that people have. List on board. Classify each disease as communicable or non-communicable.

List at least three facts about communicable or contagious diseases on a sheet of paper.

2. Concept:

AIDS is unlike most other communicable diseases because there is no cure. To date, all who have contracted AIDS have or probably will die.

Objective:

To distinguish between fact and opinion concerning AIDS.

Suggested Discussion/Activities:

Have students write three sentences describing what they know about AIDS.

Write the term AIDS on the board and ask the students to identify what each letter stands for.

Ask students to discuss why some individuals are more likely to contract the AIDS virus.

Clarify the ways AIDS may or may not be spread.

Discuss the symptoms of AIDS.

Discuss the most common misconceptions people have about AIDS.

Discuss that abstinence can prevent AIDS.

3. Concept:

Human concerns related to AIDS have increased. What else do we need to know?

Objectives:

To know how to locate and contact local and state resources where AIDS information can be obtained.

To understand society's attitudes towards AIDS and persons with AIDS.

To know about current information concerning the medical and social aspects of AIDS.

Suggested Discussion/Activities:

Compile a list of agencies (resources) where information on AIDS is available.

Use current articles to explore through class discussion society's attitudes about AIDS.

4. Concept:

There are behaviors which lead to a healthful lifestyle including reasoning abilities regarding choices and their consequences. Recognize that individuals have control over their health-related behaviors.

Objectives:

Demonstrate respect for personal privacy.

Understand the role of personal behavior in disease prevention.

Understand the concept of risk and the consequences of risk-taking behaviors.

Practice the responsibilities involved with family, friends and school.

Recognize the help and support that family, friends and school can provide.

Suggested Discussion/Activities:

Discuss areas which impact personal privacy and safety, such as:

- right to set and uphold personal and physical limits,
- right to express or withold one's own thoughts and feelings,
- right to protect oneself from possible harm.

Develop a personal health profile identifying:

- immunizations
- diseases
- medical conditions, allergies and medications
- injuries
- surgery
- height and weight
- daily health practices

Discuss the relationship between medical information, health practices and one's health profile.

Define risk and identify some risk-taking behaviors such as:

- smoking
- drinking an alcoholic beverage
- using illegal drugs

Identify positive alternative behaviors for each of the above.

Evaluate alternatives and recognize which ones best promote positive outcomes.

Discuss how responsibilities differ from student to student.

Have students brainstorm ways that they might need help from others.

Identify resources where students can get help, such as:

- parents/relatives
- friends/neighbors
- teachers
- principal
- school nurse

AIDS EDUCATION PROGRAM

GRADES 6 - 12

AIDS EDUCATION PROGRAM

GRADES 6-12

Concepts from the 4-5 program may be used, however, focus should be on health behaviors rather than on the biomedical aspects of the AIDS disease. AIDS issues should be made as real as possible without frightening students.

It is important to be nonthreatening and to alleviate anxiety, to be honest and to provide information in a straightforward manner. Emphasis should be placed on acknowledging that people have natural sexual feelings and that diseases can be contracted through sexual contact.

Be prepared to answer detailed questions from students who want more than minimal information. Information about AIDS should be presented in the context of other sexually transmitted diseases. Students should be helped to develop responsible decision making skills.

The activities beginning on page 39 are provided to assist you in the development of an AIDS education curriculum.

1. Concept:

The Acquired Immune Deficiency Syndrome (AIDS) disease has become one of our most serious health problems, therefore, accurate education about AIDS in the school setting must reach our students.

Objectives:

To gain an understanding of AIDS by: defining Acquired Immune Deficiency Syndrome, AIDS Related Complex (ARC) and Human Immunodeficiency Virus (HIV).

To recognize and discuss the extent and seriousness of the AIDS problem.

Suggested Discussion/Activities:

Individual student definitions or small group worksheet completion of definitions.

Collect current articles on AIDS as related to incidence and cost, locally, worldwide and nationally.

2. Concept:

Information about the signs, symptoms, resources and methods of transmission of AIDS shall be provided.

Objectives:

To recognize there are also ways in which you cannot get AIDS.

To recognize the cause of AIDS.

To contrast the AIDS virus infection from having AIDS.

To know that AIDS has three stages.

To understand there are various ways of transmitting the AIDS virus.

Suggested Discussion/Activities:

Identify the causes of AIDS.

List as many ways as possible that are NOT ways in which you can get AIDS.

Play a game called "AIDS-Basketball".

List methods of transmission.

Complete the unfinished sentences worksheet.

3. Concept:

Individuals have a personal and social responsibility to assist in the prevention and control of AIDS.

Objectives:

To recognize that there are ways in which persons can reduce the risk of contracting AIDS.

To formulate ways in which individuals and society can assist in the prevention and control of AIDS.

To understand health measures that could be practiced or enforced to prevent and control AIDS.

Suggested Discussion/Activities:

Complete the "Risk Reduction Worksheet".

Discuss as many ways as possible, by brainstorming in small groups, measures to control and prevent AIDS.

Role playing situations (family, school, peers, etc.) where accurate information about AIDS can be given.

Make media spots (TV, radio, magazines, newspapers) or posters informing the general public of AIDS prevention and control.

4. Concept:

Human concerns related to AIDS have increased. What else do we need to know?

Objectives:

To know about current information concerning the medical and social aspects of AIDS.

To know how to locate and contact local and state resources where AIDS information can be obtained.

To understand society's attitudes towards AIDS and persons with AIDS.

Suggested Discussion/Activities:

Read current articles concerning issues dealing with AIDS and discuss how society has handled those situations.

Have students in small groups hypothesize future trends concerning AIDS.

Gather media information on AIDS research.

Compile a list of agencies and resources where information on AIDS is available, i.e. parents, churches, health departments, libraries, etc.

Explore through class discussion society's attitudes towards AIDS.

5. Concept:

The sexually transmitted diseases, a group of communicable diseases that are transmitted almost always through intimate physical contact with an infected person, are a serious health problem because of growing frequency and/or effects.

Objectives:

To comprehend why sexually transmitted diseases are a serious health problem and to stress that abstinence is the only sure preventative.

Formulate ways in which individuals and society can assist in the prevention and control of sexually transmitted diseases.

Suggested Discussion/Activities:

List three ways that communicable diseases are passed from one person to another.

Discuss sexually transmitted diseases and communicable diseases.

Write the following terms on the board and compare the causes, effects and cures (preventive measures) of all listed:

Chlamydia
Syphilis
Genital herpes
AIDS
Gonorrhea

Discuss health department clinics that provide prevention and treatment of sexually transmitted diseases, and the fact that the clinic, by law, must maintain confidentiality.

ACTIVITIES

HANDWASHING DEMONSTRATION

This helpful hint for a handwashing demonstration is from Lori Rosso, public health nurse who coordinates school health services for the Dodge County nurses and this activity was taken from Preventing the Spread of Communicable Diseases, Wisconsin Department of Education.

Equipment: Box of ground cinnamon
Vegetable oil
Bar soap
Liquid soap
Source of running warm and cold water
Paper towels

Have pupils rub a small amount of vegetable oil on their hands. Then shake a small amount of ground cinnamon over front and back of hands and rub together. The cinnamon will represent disease carrying microorganisms or "germs" and the oil represents our natural skin oils. Next have students use the following handwashing techniques:

1. Have pupils wash hands using cold running water and no soap.

2. Wash hands using cold running water and bar soap.

3. Wash hands using liquid soap and warm running water.

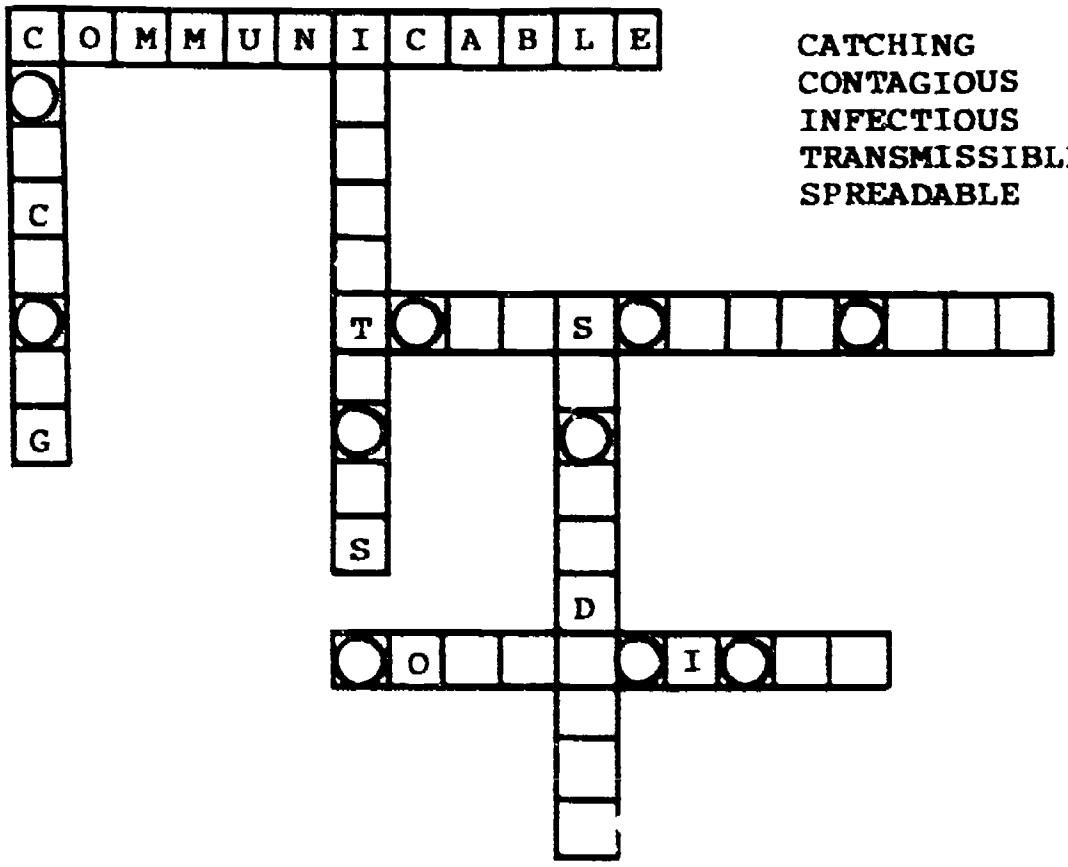
Make comparisons of which technique gets rid of the most microorganisms or "germs". Point out contamination on soap, sink, and faucets and problem solve how to eliminate the most number of "germs".

CROSSWORD PUZZLE

Synonyms are words that are spelled differently but which mean the same thing; for example, ache and pain. Listed below are synonyms for the term COMMUNICABLE DISEASE. Use these words to fill in the missing letters that complete the puzzle. To find the mystery word, record and unscramble the circled letters. Write the letters in the spaces provided below.

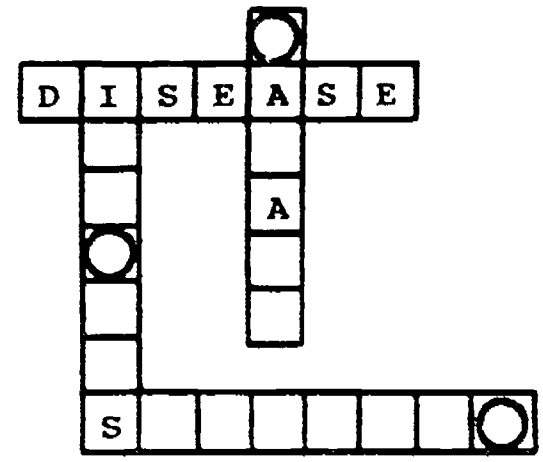
SYNONYMS FOR COMMUNICABLE

CATCHING
CONTAGIOUS
INFECTIOUS
TRANSMISSIBLE
SPREADABLE



SYNONYMS FOR DISEASE

AILMENT
ILLNESS
SICKNESS
MALADY



THE MYSTERY WORD IS: _ _ _ _ _ _ _ _ _ _ _ _ _ _

MYTH AND FACT AIDS ACTIVITY SHEET

Read each statement. Decide whether the statement is fact or myth. Place the word "Myth" in front of the statements that are untrue, and the word "Fact" in front of the statements that are true.

_____1. If you shake hands with someone who has the AIDS virus, you will become infected.

_____2. To avoid AIDS, do not go near a person who people say has the AIDS virus.

_____3. Only drug-abusers have the AIDS virus.

_____4. There have been no known cases of family members getting AIDS by using the same toilet, dishes, or linens.

_____5. If you kiss someone on the cheek who has AIDS, you may get the disease.

_____6. AIDS is a blood borne disease which can be transmitted sexually.

_____7. All people infected with the AIDS virus look and feel sick.

_____8. The best method of prevention from AIDS is abstinence from sexual contact and IV drug abuse.

_____9. AIDS can be spread in food.

_____10. People who engage in risky behaviors are placing themselves in danger of getting AIDS.

_____11. Anyone can get the AIDS virus if they are shooting drugs, and sharing needles/works.

_____12. Some needs of a person with AIDS are strong family ties and social support groups.

_____13. If you discover you have the virus early, you can be cured.

_____14. One goal of AIDS education is to prevent future cases of AIDS in the youth of Arizona.

MYTH AND FACT ACTIVITY SHEET ANSWER KEY

1. MYTH
2. MYTH
3. MYTH
4. FACT
5. MYTH
6. FACT
7. MYTH
8. FACT
9. MYTH
10. FACT
11. FACT
12. FACT
13. MYTH
14. FACT

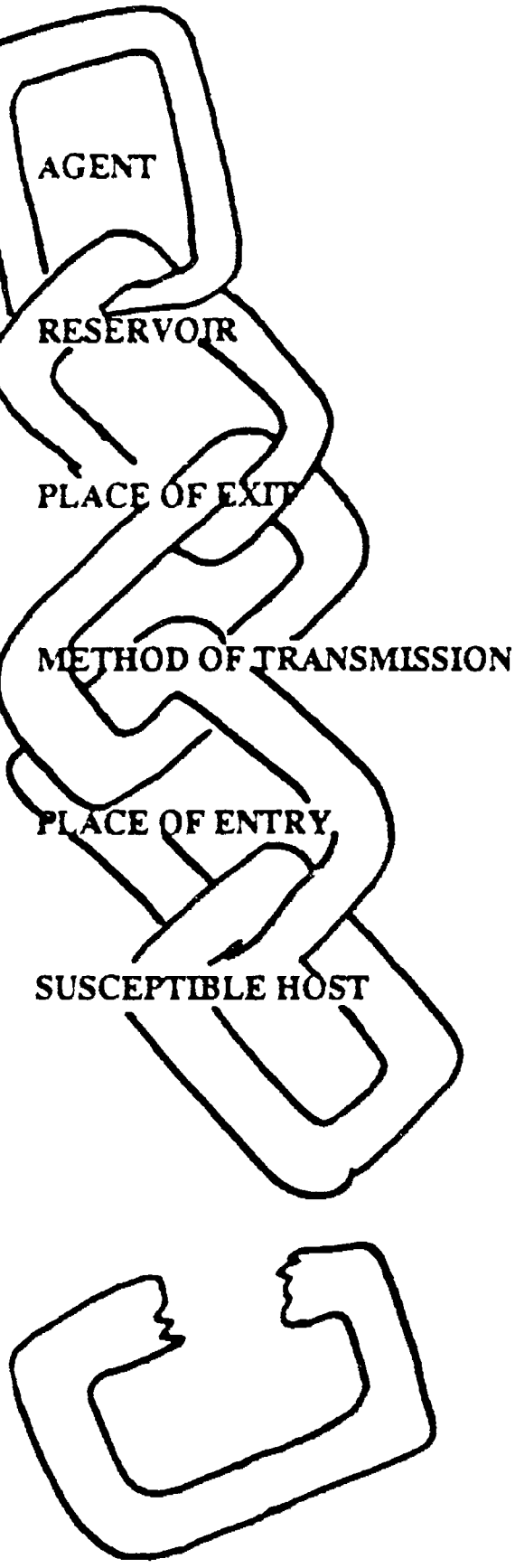
COMMUNICABLE OR NONCOMMUNICABLE?

Indicate for the diseases listed below which are communicable and which are noncommunicable by writing a "C" before the communicable diseases and an "N" before the noncommunicable diseases.

1. _____AIDS
2. _____allergies
3. _____asthma
4. _____athlete's foot
5. _____cerebral palsy
6. _____chicken pox
7. _____common cold
8. _____diabetes mellitus
9. _____emphysema
10. _____epilepsy
11. _____heart disease
12. _____hemophilia
13. _____hepatitis
14. _____influenza
15. _____measles
16. _____mumps
17. _____rubella
18. _____sickle-cell anemia
19. _____ulcers
20. _____whooping cough

ANSWERS TO: COMMUNICABLE OR NONCOMMUNICABLE?

1. C
2. N
3. N
4. C
5. N
6. C
7. C
8. N
9. N
10. N
11. N
12. N
13. C
14. C
15. C
16. C
17. C
18. N
19. N
20. C



Chain of Infection
Breaking the Links

The six links in the Chain of Infection are:

AGENT: The germ or pathogen which produces an infection. Agents include bacteria, viruses, fungi and animals. NOTE: With STD's an infected person may have two or more STD's at the same time and therefore may need more than one kind of treatment.

RESERVOIR: A place where germs survive, such as in humans, animals, soil, air, food or water or any such object.

PLACE OF EXIT: Where germs leave the reservoir. In humans, it includes the mouth, nose, anus, genitals and breaks in the skin.

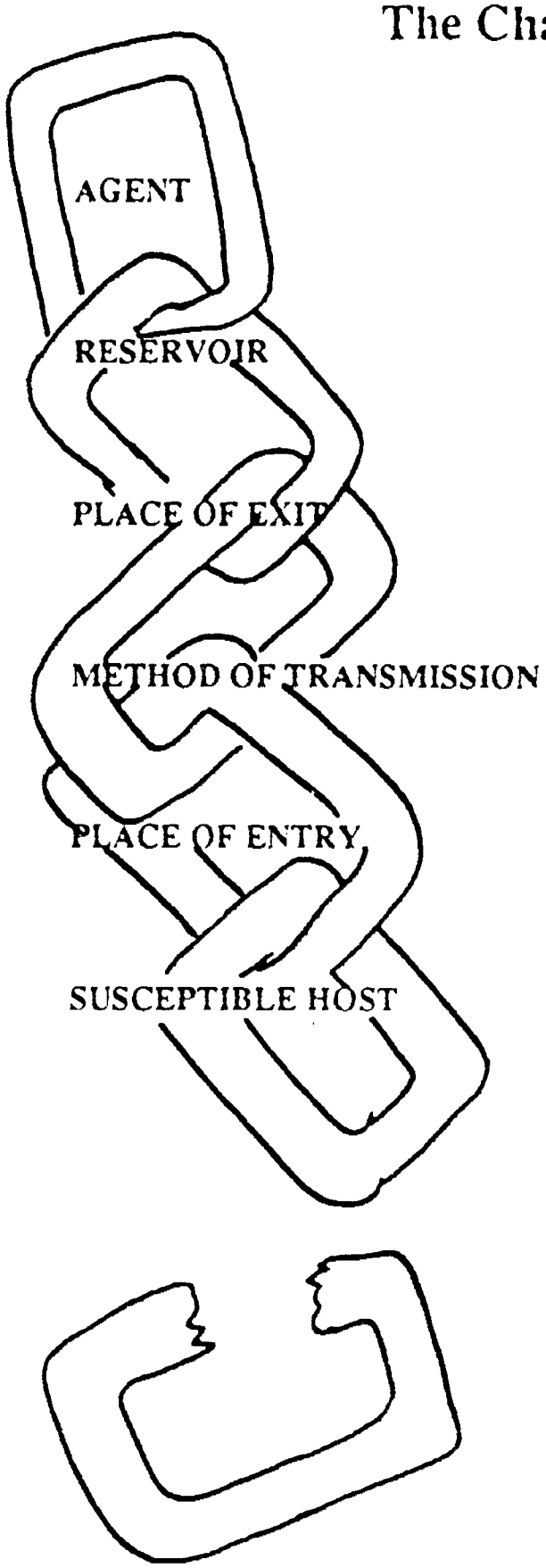
METHOD OF TRANSMISSION: How the germ travels. Direct transmission involves close, intimate contact. Indirect transmission occurs when something else carries the germ, such as insects, food or contaminated water.

PLACE OF ENTRY: Where germ or pathogen enters the next host, usually in the way it exited the old host.

SUSCEPTIBLE HOST: Condition of the body for infection. Immunizations, good physical and mental health with proper hygiene and good nutrition may help prevent germ invasion.

BREAKING THE LINKS IN CHAIN OF INFECTION INCLUDE: Diagnosis, treatment, prevention, immunizations , knowledge, avoiding infected contacts, prophylactics for some STD's. Remember: when one person has an STD, someone else has it too! That's why you have to tell your contacts.

Breaking Links in The Chain of Infection



The six links in the Chain of Infection are:

AGENT:_____

RESERVOIR HOST:_____

PLACE OF EXIT:_____

METHOD OF TRANSMISSION:_____

PLACE OF ENTRY:_____

SUSCEPTIBLE HOST:_____

BREAKING LINKS IN THE CHAIN OF INFECTION INCLUDE:

AIDS BASKETBALL

The purpose of this game is to enhance learning of AIDS-related facts and/or to serve as a review of the facts.

Materials required will be the questions presented below, and paper and pencil (or chalkboard) for keeping score. It will take approximately 30 minutes to play.

RULES

1. Divide the class into groups or teams.

2. Ask a question of one team member at a time, taking turns within each team and alternating between teams.

3. Give the individual the choice of either a two-point or three-point question. (The three-point questions are supposedly more difficult.)

4. Accept only one answer given within a reasonable time period (such as 10 seconds), judging whether it is correct or incorrect. Only correct answers earn points.

5. Any assistance given to a team member trying to answer a question, or any other form of "illegal" play, results in a foul being called on that team. The other team gets an opportunity to answer a foul shot question, worth one point. (The teacher might be able to create other situations that result in foul shots being awarded.)

6. Determine how long the game will last before beginning. Announce the limit to the class. For example, the game could be considered over when everyone on each side has been asked a question, when a pre-determined number of questions have been asked, or when all of the questions have been used.

7. The teacher, or a student, can keep score on a sheet of paper or on the chalkboard.

8. The teacher might give a small award to the winning team.

2-POINT QUESTIONS

1. What term does AIDS stand for?

   acquired immunodeficiency syndrome

2. What is the cause of AIDS?

   a virus

3. Which body system does the AIDS virus damage?

   immune system

4. What happens to a person with the AIDS virus that usually does not occur to people with a healthy immune system?

   they acquire certain rare diseases

5. How many people in the United States may be infected with the AIDS virus?

   1 to 2 million

6. Slightly over one-half of AIDS cases are from what two States?

   California and New York

7. The AIDS virus is mainly present in what two body fluids?

   semen and blood

8. What are the two most common ways the AIDS virus is transmitted?

   sexual contact and IV drug abuse

9. What drug-related behavior of persons injecting illicit drugs allows the exchange of blood?

   sharing IV drug needles and syringes

10. Early in the AIDS epidemic, many persons with what type of condition became infected with the AIDS virus by transfusions of the blood-clotting factor?

    hemophiliacs

11. Most children who get the AIDS virus acquired it in what way?

    from their infected mother during pregnancy or childbirth

12. What are three of the high risk groups?

    homosexuals, IV drug users, homosexual/bisexual IV drug users

13. In many central African countries most infections with the AIDS virus are thought to be acquired through what means?

    heterosexual contact

14. How can one find out if he/she has been exposed to the AIDS virus?

    AIDS antibody test

15. Aside from donated blood, the AIDS antibody test is also used to screen people who donate what?

    semen and body organs and tissues

16. What government agencies provide confidential AIDS testing and counseling?

    local and state health departments

17. What is the time range for the incubation of AIDS?

    a few months to several years or longer

18. What is the surest way of not getting the AIDS virus?

    abstinence in sexual activity and IV drug abuse

19. Both persons of a couple having sex with each other only is called what?

    sexual fidelity

20. What do the initials "ARC" mean?

    AIDS Related Complex

3-POINT QUESTIONS

1. Name the three ways the AIDS virus is passed.

    sexual contact
    sharing IV drug needles and syringes
    from an infected mother to her fetus or newborn child
    infected blood or blood products

2. What are the initials of two common illnesses of persons with AIDS?

    PCP and KS

3. Experts believe that about how many people in the United States will have AIDS by 1991, with how many having died?

    270,000 having AIDS and 137,000 having died.

4. Persons of what three types of sexual lifestyles who practice risky behaviors may acquire the AIDS virus?

    heterosexual, male homosexual and male bisexual

5. Women with a positive AIDS antibody test should do what three things relative to children?

   postpone pregnancy, not breast-feed, have her children tested for the AIDS antibody

6. Name the best sexual practice for preventing AIDS.

   sexual abstinence

7. Name the two tests available for identifying the presence of HIV.

   ELISA and Western Blot

1-POINT FOUL SHOT QUESTIONS

1. Has anycne completely recovered from AIDS?

   no

2. Do all persons who acquire the AIDS virus also develop AIDS?

   no

3. Does the AIDS virus itself or the opportunistic diseases usually kill the person who is infected with the AIDS virus?

   opportunistic diseases

4. Can the AIDS virus be passed by an infected person even though the symptoms of infection are not present?

   yes

5. Have only a fraction of persons infected with the AIDS virus developed AIDS?

   yes

6. Is there a cure or a vaccine for the AIDS virus?

   no

7. Is the AIDS virus highly contagious?

   no

8. Is the blood supply available for transfusion now safe?

yes

9. Does every child of an infected mother acquire the AIDS virus?

no

10. Is the number of infected heterosexual men and women believed to increase or decrease in the future?

increase

11. Is AIDS a problem among all races?

yes

12. Should a person be afraid of contracting the AIDS virus by casual, social or family contact?

no

13. Should a person be concerned about whether he/she could be infected with the AIDS virus if the individual is sexually active with more than one person?

yes

14. Does a positive AIDS antibody test mean that the person has or will develop AIDS?

no

15. Have there been any reported cases whether the AIDS virus has been transmitted through kissing?

no

16. Have there been any reported cases where the AIDS virus has been transmitted through insect bites?

no

17. Since one cannot visually determine if a person has the AIDS virus, is it important to know if a possible sex partner is at risk, or has had partners at risk?

yes

18. Are some prostitutes likely to be infected with the AIDS virus or other STD?

yes

19. Can teenagers get confidential counseling and testing for the AIDS antibody test through local or state health departments?

yes

RISK REDUCTION WORKSHEET

(List as many ways to reduce risks as possible.)

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.
13.
14.
15.
16.
17.
18.
19.
20.

UNFINISHED SENTENCES ABOUT AIDS

After reading the first part of the unfinished sentences, write in what you think would complete each sentence.

1. People who get AIDS are . . .

2. Persons with AIDS need . . .

3. Practicing sexual abstinence to avoid the AIDS virus is . . .

4. Not sharing IV drug needles and syringes to avoid passing the AIDS virus is . . .

5. Fearing AIDS . . .

6. Persons having a positive AIDS antibody test should . . .

7. Denying equal opportunities for persons with AIDS is . . .

8. If a friend got AIDS, most young adults would . . .

9. The public's support for persons with AIDS can be increased by . . .

10. To help combat AIDS, young adults should . . .

11. Concerning AIDS, teenagers need to know . . .

HOW CAN AIDS BE PREVENTED?

Are there any methods of protection or choices that never fail?

Yes, there are. The best and safest way for teenagers and young people to protect themselves against AIDS is to abstain from sexual activity. This method is used by many people and it works. Today we have lots of kids and young adults saying no to drugs and alcohol. You also have the right to say no to sexual activities.

What's that line?

There are a lot of lines out there used to get sexual favors from both men and women. Have you ever heard any of these?

"Prove you're a woman."

"Prove you're a man."

"You would if you loved me."

"What's wrong with you anyway?"

"Everybody's doing it."

"Come on. Just once won't hurt."

You can and have the right to say no and not feel guilty each and every time. You also can use some lines for your comeback. Here are some to practice.

"If I have to prove to you I love you, then it isn't really love."

"I'm not ready to get involved."

"I like us both too much to have sex with you now."

"I don't want to have sex with you."

"If you really loved me, you wouldn't ask me to show you."

"I'm special. I'm not everybody. I'm saying no."

As always, you can use the broken record response.

"I don't want to have sex with you."

You can reverse the pressure by using what the person said to you and show him/her that he/she has to make the change.

Line: "Do you have a problem?"

Response: "No. And that's exactly why I don't have to have sex with you. Do you have a problem?"

You can also completely remove yourself from the situation, by using excuses that are sometimes humorous and creative and save the friendship.

Line: "Do you have a problem?"

Response: "Yes. I have a court date to answer questions about the mysterious disappearance of the last person who asked me that."

Take some time to jot down three of the best lines you have heard or are aware of. Then jot down a response.

Lines:

1.

2.

3.

Responses:

1.

2.

3.

Remember: is OK to say no. It may be the best answer in any situation.

An AIDS Education Plan

Imagine that the principal of this school has hired you to make sure that all the students in this school know about AIDS—what it is, how it is transmitted, and how it can be prevented. Write a proposal explaining to the principal how you think this can best be done.

PRESS REPORTS ON PEOPLE'S RESPONSES TO AIDS

Find an article about AIDS in a newspaper or magazine that talks, at least in part, about people and AIDS. (Articles reporting only research news may not mention anything about people, and would not be useful for this exercise.) Attach the article to this worksheet and answer the following questions:

1. Who are the people (or the person, or the groups) mentioned in this article?

_____

_____

_____

2. How are these people (or this person, or these groups) responding to the AIDS epidemic?

_____

_____

_____

3. How do you feel about what these people (this person) are doing? Do you think their responses are positive? Negative? Do you agree or disagree with what they are doing? Why?

_____

_____

_____

F I N D I N G A N S W E R S T O Q U E S T I O N S A B O U T A I D S

1. Think of a question you have about AIDS that has not been answered in the class. Write the question:_____

_____

_____

2. Where might you go to find the answer to this question? Whom could you ask?_____

_____

_____

_____

3. Which of the above sources will be most likely to give you factual information?_____

_____

_____

_____

PERSONAL OPINIONS ABOUT AIDS

These are personal opinion questions. There are no wrong answers!
Please answer as honestly as you can. Do not put your name on this paper.

1. I think people with AIDS

2. Learning about AIDS in school is:
   a. A good idea. Really important.
   b. A bad idea. A waste of time.
   c. Other

3. Is there any way the AIDS epidemic has affected you, or might affect you in the future?

PEOPLE'S RESPONSES TO AIDS

1. Think of someone you know or someone you have heard of who has responded to the AIDS epidemic in a way you feel is positive and helpful.

What has his or her response to the AIDS epidemic been?

_____

_____

_____

Why do you think this is a positive and helpful response?

_____

_____

_____

2. Think of someone you know or someone you have heard of who has responded to the AIDS epidemic in a way you feel is negative and not helpful.

What has his or her response to the AIDS epidemic been?

_____

_____

_____

Why do you think this response is negative and not helpful?

_____

_____

_____

SUGGESTED TEST QUESTIONS

Test questions are presented here for teachers desiring to conduct a written examination of student understanding of AIDS. Questions include five types: (1) true or false; (2) multiple choice; (3) short answer; (4) essay; and (5) life situations. The correct answer is included for each question.

A teacher may not wish to use all of the questions, but can be selective according to tne situation. The language skills and academic sophistication of the students, in particular, should be considered.

TRUE OR FALSE

T 1. AIDS is caused by a virus.

T 2. No one has completely recovered from AIDS.

F 3. The majority of people who have acquired the AIDS virus have developed AIDS.

T 4. The AIDS virus can be transmitted by an infected person even though there are no symptoms of infection.

F 5. There is a vaccine for the AIDS virus.

T 6. The AIDS virus is present in certain body fluids, mainly semen and blood.

T 7. The AIDS virus is not highly contagious.

T 8. In the U.S. it is now nearly impossible to get AIDS from blood transfusions.

F 9. There is a chance of getting the AIDS virus from donating blood.

F 10. Every child born from a woman with the AIDS virus acquires the virus during or after childbirth.

T 11. It is believed that the number of heterosexual men and women infected with the AIDS virus will increase.

T 12. AIDS is a problem among all races.

F 13. The majority of persons with AIDS in many central African countries are homosexual and bisexual men.

F 14. All persons who have sex, even if they are not members of AIDS high-risk groups, should take the AIDS antibody test.

T 15. Teenagers can get confidential AIDS antibody testing and counseling.

F 16. Many persons have been infected with the AIDS virus through casual contact.

F 17. There have been reported cases where the AIDS virus was transmitted by kissing only.

T 18. The best way to avoid contracting the AIDS virus from IV drug abuse is to not share needles or syringes.

MULTIPLE CHOICE

a 1. The most common way the AIDS virus is transmitted is by:

a. sexual contact.
b. IV drug abuse.
c. blood transfusions.
d. mother to child.

c 2. Most of the persons with AIDS in the United States are:

a. heterosexual drug abusers.
b. heterosexual sex partners of persons with AIDS or at risk for AIDS.
c. homosexual and bisexual men.
d. recipients of transfused blood or blood-clotting factor.

d 3. The surest way of not acquiring the AIDS virus is by:

a. sexual fidelity.
b. not sharing IV durg needles or syringes.
c. careful selection of sex partners.
d. sexual abstinence and abstaining from IV drug abuse.

b 4. Which one of these statements about the AIDS antibody test is NOT true?

a. Persons with a positive test result can transmit the virus to others.
b. A positive test result nearly always means that the person will develop AIDS.
c. Test results may be negative when a person has been exposed to the AIDS virus.
d. The antibody test results are very accurate, though not perfect.

a 5. Which one of these statements about the transmission of the AIDS virus is NOT true?

a. The spread of the AIDS virus is similar to other transmissible diseases like the cold, flu, or measles.
b. Children with the AIDS virus infection pose no risk for other students in the school setting.
c. People can, for example, work with others and attend school and public events without fear of getting AIDS.
d. No evidence exists indicating that flies and mosquitoes are capable of transmitting the AIDS virus.

c 6. Which one of these people would be considered as having the lowest risk for being infected with the AIDS virus?

a. The person abuses IV drugs.
b. The person has a positive AIDS antibody test.
c. The person practices, along with partner, sexual fidelity.
d. The person has sex with someone who has many partners.

SHORT ANSWER

1. AIDS is the end result of what? (infection with the AIDS virus)

2. What do the initials "ARC" mean? (AIDS Related Complex)

3. About how many persons in the United States are infected with the AIDS virus? (1 to 2 million)

4. Slightly over one-half of AIDS cases come from what two States? (California and New York)

5. Experts believe that about how many people in the U.S. will have AIDS by 1991? (270,000)

6. Name the two body fluids that are known to transmit the AIDS virus. (semen and blood)

7. Blood-to-blood transmission of the AIDS virus is nearly entirely limited to what practice? (sharing of IV drug needles and syringes)

8. Many persons with what type of health condition were infected early in the AIDS epidemic through contaminated blood product transfusion. (hemophilia)

9. What are the three major ways the AIDS virus is transmitted? (sexual contact, sharing of IV drug needles and syringes, and mother to fetus or newborn child)

10. What is the incubation period for the AIDS virus? (a few months to several years or more)

ESSAY

1. Why do people have such a strong fear of AIDS? (AIDS is a deadly disease. Information is reported daily. There are many myths about how the AIDS virus is transmitted.)

2. What should a person do upon learning of a positive AIDS antibody test? (Avoid exposing others. Do not donate blood, semen, or body organs and tissues. Encourage their sex and drug needle partner(s) to get the AIDS antibody test. Their babies and children should also be tested.)

3. What is important to know if one's friend develops AIDS? (Many persons with AIDS have been mistreated. Some have been rejected by friends. Many have felt isolated and emotionally distressed. AIDS is not passed by casual contact. The friend needs your support and understanding. Continue sharing activities and conversation. The families of persons with AIDS may also need help.)

AIDS ADVICE COLUMN

The purpose of this activity is to provide rehearsal in solving AIDS related problems. Suggested responses are provided to each letter. Students' answers do not need to match the suggested responses word-for-word to be considered correct.

Pretend that you have an advice column that appears in the newspaper. People send letters to you about personal problems, and you suggest a solution.

LETTER 1

Dear _____:

I've read that people die from getting AIDS, and that the number of AIDS cases is growing very rapidly. I don't want to take any chances of getting AIDS. What's the surest way I can keep from getting AIDS?

For-Sure Sam

LETTER 2

Dear _____:

Because of all the publicity about AIDS, I've become very afraid of getting it. My boyfriend and I have sex with each other only, and we don't abuse IV drugs. What should I do?

Afraid Alice

LETTER 3

Dear _____:

I have had sex with someone in a high-risk group. Is it possible that I might have been exposed to the AIDS virus? I'd like to take the AIDS antibody test. But, I'm worried that if the results are positive, they might not be kept private.

Worried Wilma

LETTER 4

Dear _____:

My husband and I want to have a baby. However, I have been tested as having the AIDS antibody. Is it safe to have a baby? Certainly we don't want our child to get the AIDS virus.

Unsure Ursala

LETTER 5

Dear _____:

A friend of mine recently developed AIDS. I know that he needs my support, and I want to remain friends. But, I'm scared to be around him. I heard you could get AIDS from being near a person who has it.

Concerned Carlos

AIDS ADVICE COLUMN SUGGESTED RESPONSES

LETTER 1

Dear For-Sure Sam:

The AIDS virus is passed during sex and by sharing IV drug needles and syringes. Hence, the surest way to avoid becoming infected is (1) to not have sexual intercourse or other intimate sex, and (2) to not use IV drugs. If a person does have sex, precautions should be taken to avoid the exchange of body fluids. If a person does use illicit drugs, needles and syringes should not be shared or re-used.

LETTER 2

Dear Afraid Alice:

Unless your partner was infected with the AIDS virus when you started having sex with him, your chances of getting AIDS are virtually zero. Practicing sexual fidelity is a very good way of avoiding AIDS, abstinence is better.

LETTER 3

Dear Worried Wilma:

Yes, you may have been exposed to the AIDS virus. You are smart in wanting to discover if you have the virus. If you are infected, you then can make important decisions about your health and the health of your sex partner. The safest place for you to get tested is as an AIDS counseling and testing site. For information about these sites, call your local or state health department. These places provide confidential testing. I would encourage you to discuss this with your parents.

LETTER 4

Dear Unsure Ursala:

Most of the children who have the AIDS virus got it from their infected mothers during pregnancy or childbirth. Like adults having AIDS, no infant has recovered. Not every child of an infected mother acquires the virus. Since there is no way to know which baby will become infected, any woman who has a positive AIDS antibody test should postpone becoming pregnant. Perhaps someday medicine will be able to protect a child from getting the mother's AIDS virus.

LETTER 5

Dear Concerned Carlos:

I am sorry to learn that you feel scared about being near your friend. Spread of the AIDS virus by casual contact is one of the most common myths. The AIDS virus is NOT spread by being near a person having the virus, nor by hugging and handholding, for example. You are correct that your friend needs your support. Your compassion and help can be very valuable to him.

AIDS PROBLEM SITUATIONS

The purpose of this activity is to facilitate student understanding of how AIDS related problems are solved and to provide rehearsal in solving specific problems, using the basic steps in decision-making. The most desirable answers are given after each question of the problem solving process. Students' answers do not need to match the suggested responses word-for-word to be considered correct.

PROBLEM SITUATION 1

Tyra hasn't has sex with anyone, but she shares needles when she uses intravenous drugs with her friends. Since reading that AIDS can be passed by sharing IV drug needles and syringes, she wonders if she has gotten the AIDS virus.

1. What is the problem?

   Whether or not Tyra has the AIDS virus and how she can stop abusing drugs.

2. What are the important facts about the situation?

   Tyra abuses IV drugs. She is at risk for infection with the AIDS virus because she shares her needles and syringes with friends.

   The AIDS virus can be passed by sharing IV drug needles and syringes.

   Tyra may have been exposed to the AIDS virus through IV drug abuse, but not through sexual activity because she has not had sex.

   The presence of the AIDS virus can be indicated by an antibody test.

   In time, Tyra might develop symptoms of infection with the AIDS virus.

   If Tyra is infected, she is probably spreading her infection to her friends when she shares needles and syringes.

   If she is infected and later becomes pregnant, her baby could develop AIDS.

   If she continues to abuse drugs, she may die.

3. What are the possible actions?

   Tyra can take the AIDS antibody test to determine if she has acquired the AIDS virus.

Tyra can wait to see if she develops symptoms of infection with the AIDS virus.

Tyra can wait to see if her friends develop symptoms of AIDS infection or have positive AIDS antibody test results.

Tyra can stop sharing IV drug needles and syringes.

Tyra can get off drugs by seeking help from a clinic or doctor.

4. What is the best solution?

Tyra should immediately arrange to take the AIDS antibody test and seek help to stop abusing IV drugs.

PROBLEM SITUATION 2

Margarita works very hard to maintain good health. She reads about all aspects of health so that she can know the best preventive health practices. Margarita has received a little information in school about AIDS, but doesn't feel it was enough. She wants to learn more about AIDS and keep current in the future.

1. What is the problem?

Margarita needs a resource for acquiring new information about AIDS.

2. What are the important facts about the situation?

Margarita's school classes apparently do not provide adequate information about AIDS.

The school and community library may have AIDS materials, usually within magazines. Because more is continuously being learned about AIDS, the information may not be current.

Current written material can be obtained from the local or state health department or a physician.

Current information can be obtained from the AIDS National Hotline or the local AIDS hotline.

3. What are the possible actions?

Margarita could discuss this matter with her parents.

Margarita could look for materials in the school or community library.

Margarita could contact the local or state health department or a physician.

Margarita could call the AIDS National Hotline or a local AIDS hotline.

4. What is the best solution?

Margarita should discuss this with a responsible adult and then contact the local or state health department.

AIDS PROBLEM SITUATION WORKSHEET

Check which problem this form concerns: 1 _____ 2 _____

Solving AIDS problems involves a series of steps. These steps make up the decision-making process used to discover the best solution to a problem. This activity asks you to use the major steps in solving an AIDS problem.

SOLVING THE PROBLEM

1. WHAT IS THE PROBLEM?

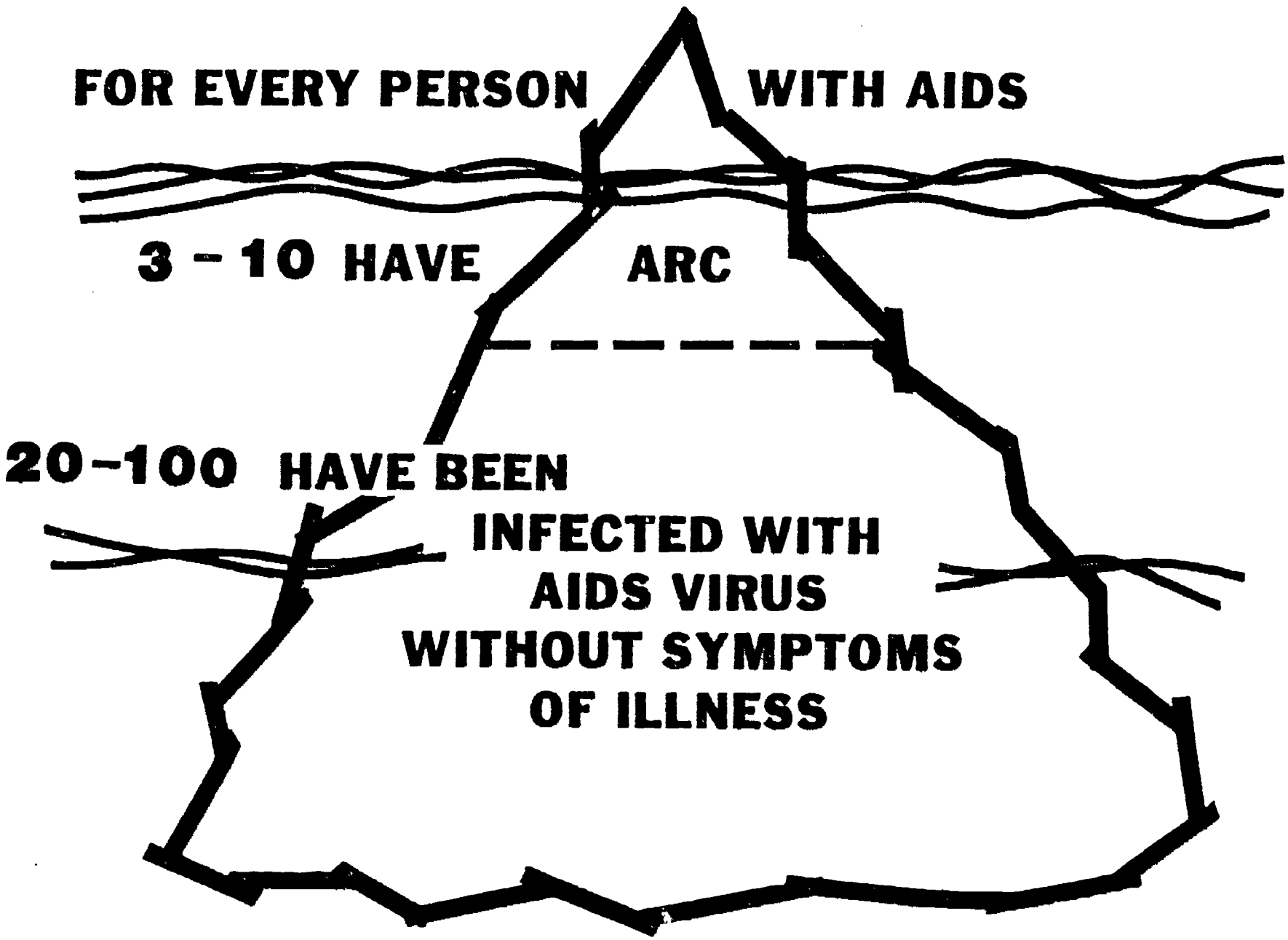
2. WHAT ARE THE IMPORTANT FACTS ABOUT THE SITUATION?

3. WHAT ARE THE POSSIBLE ACTIONS?

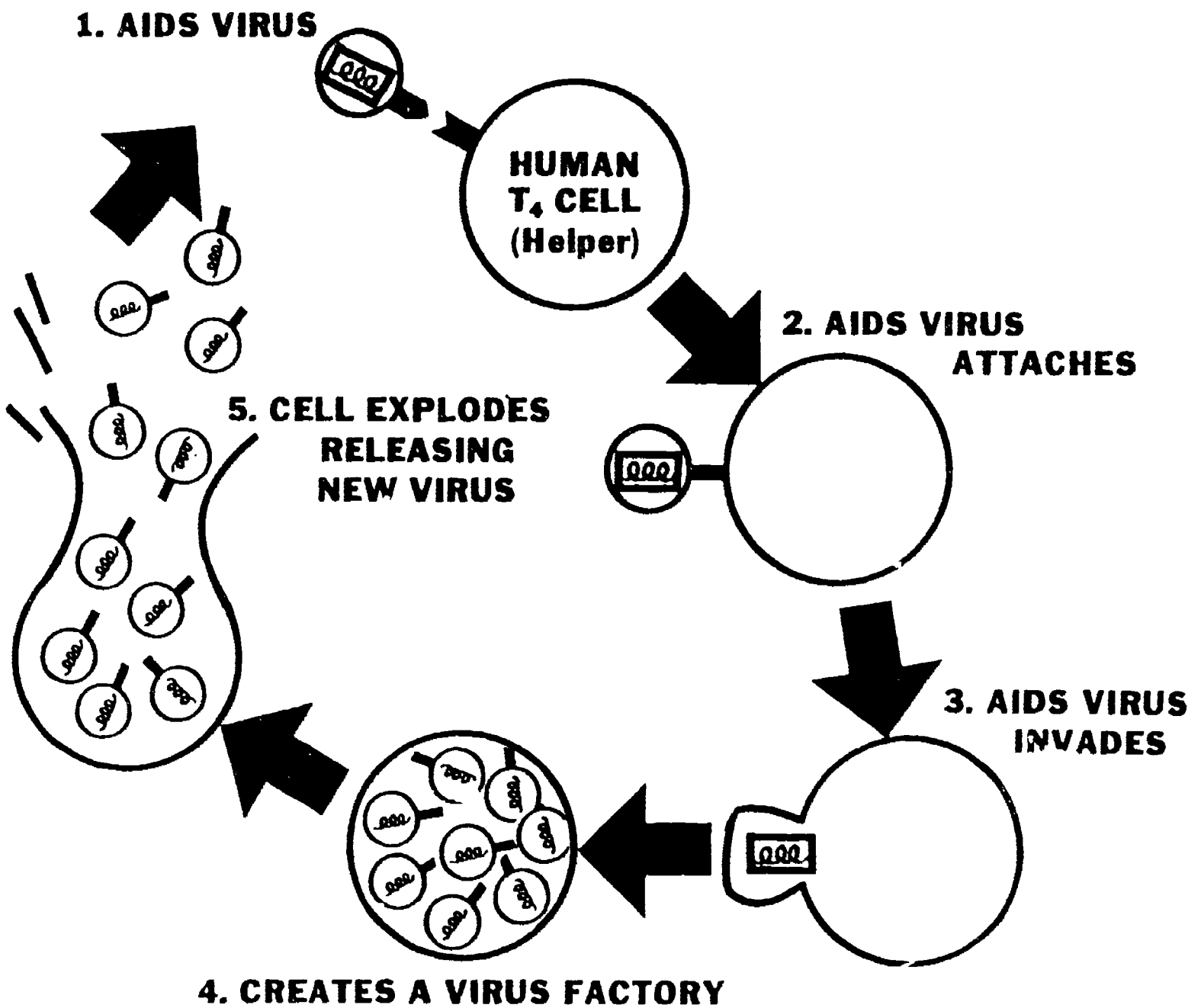
4. WHAT IS THE BEST SOLUTION?

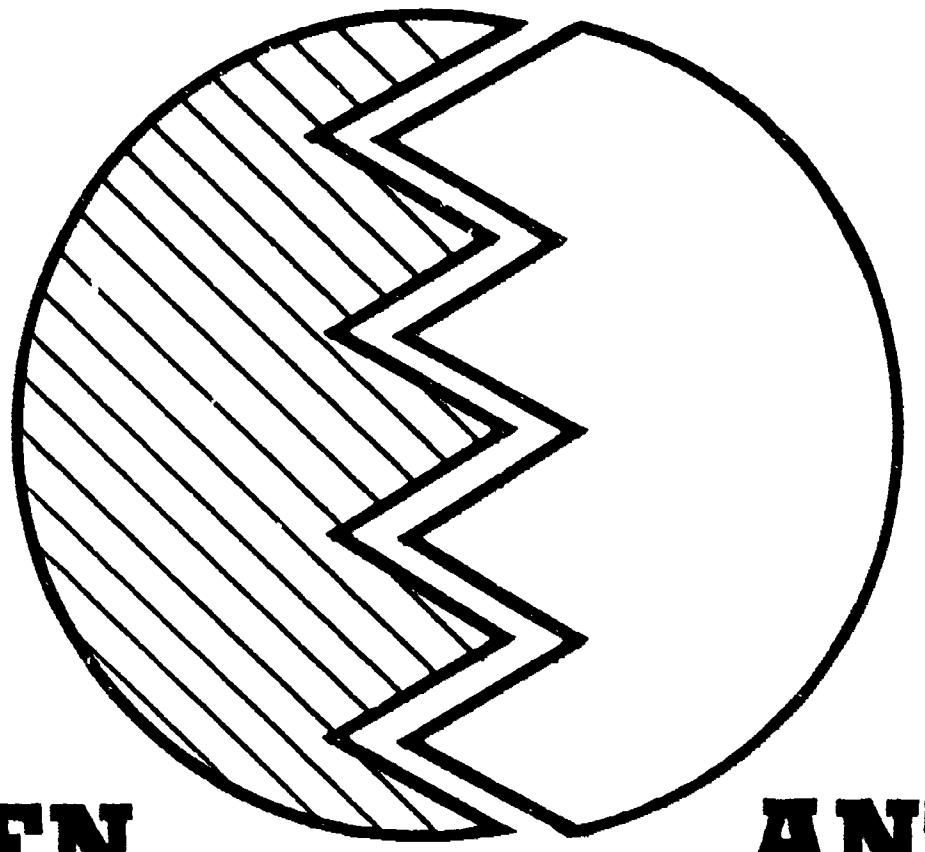
TRANSPARENCIES/HANDOUTS

THE ICEBERG


FOR EVERY PERSON WITH AIDS
3 - 10 HAVE ARC
20-100 HAVE BEEN
INFECTED WITH
AIDS VIRUS
WITHOUT SYMPTOMS
OF ILLNESS

EFFECT ON THE IMMUNE SYSTEM





ANTIGEN

[Foreign Substance]

93

ANTIBODY

94

HOW ONE PERSON CAN CREATE AN AIDS EPIDEMIC AN ACTUAL CASE STUDY*

■ AIDS

▨ ARC

□ not infected

This heterosexual man has AIDS.

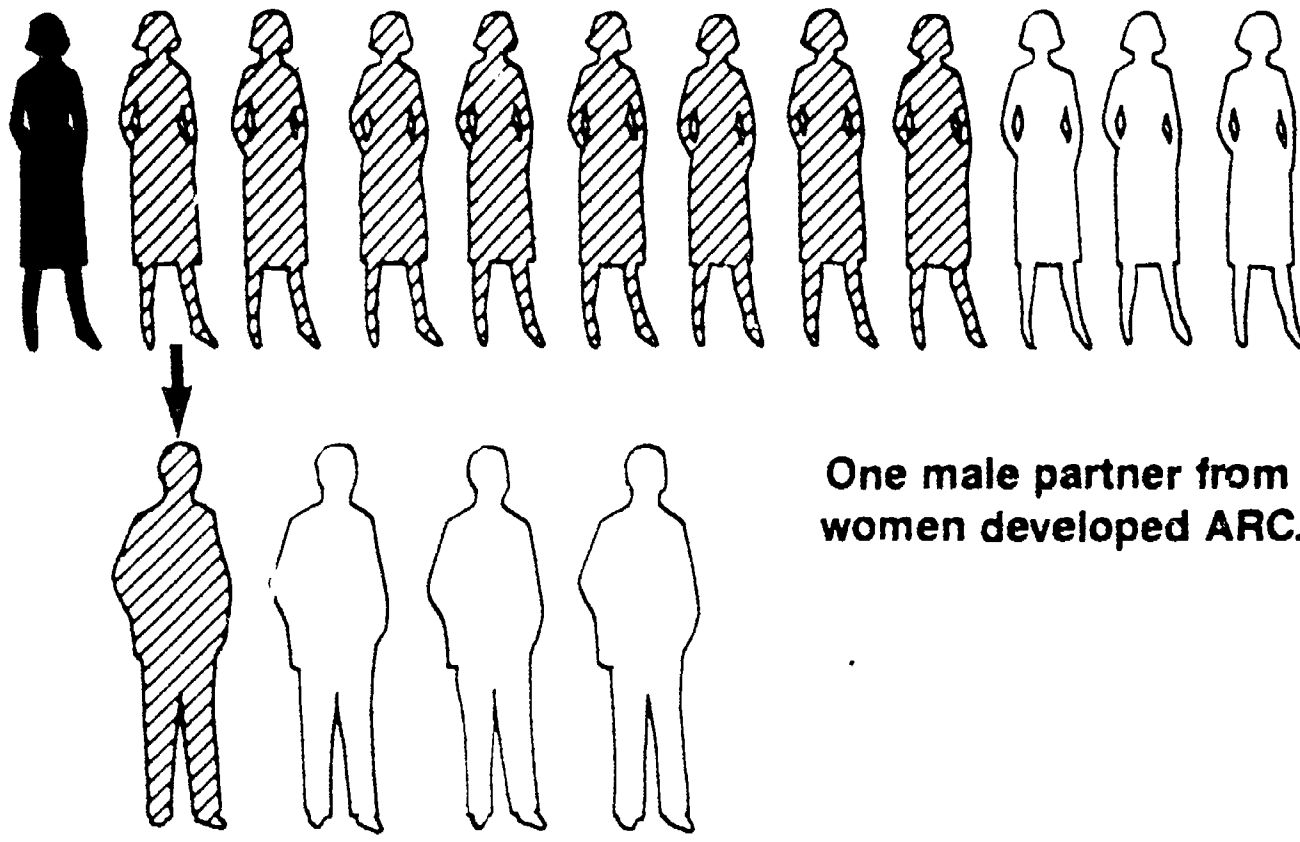
He had sexual intercourse with 12 women.

None of the women were drug users.

Nine women developed ARC.

One woman developed AIDS.

Three tested negative for AIDS.



One male partner from these women developed ARC.

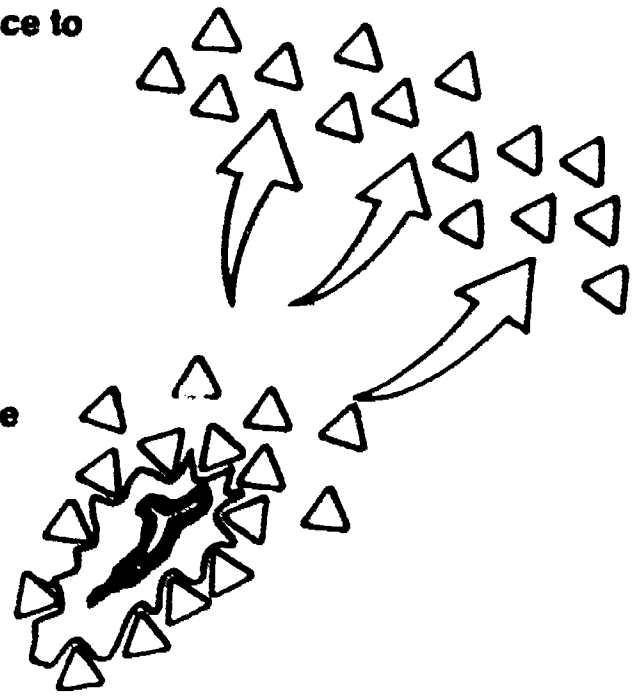
The origin of AIDS in the man was not known.
He died at age 40.
He left many others infected with AIDS.

* Adapted from: *U.S. News and World Report*, January 12, 1987, p. 65

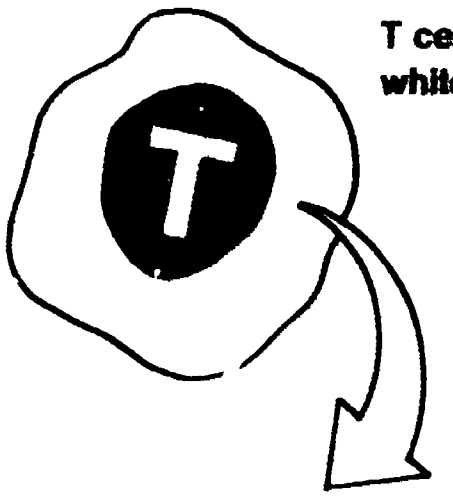
AIDS VIRUS ATTACK

4. As a result, a person no longer has resistance to life-threatening infections.

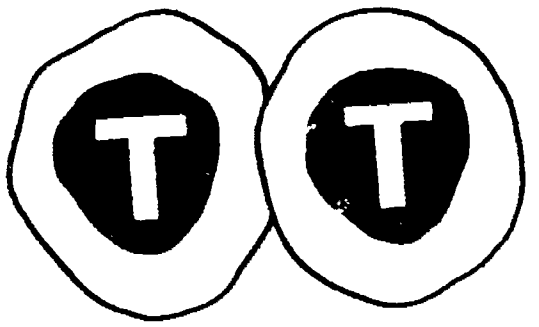
3. When T cells are destroyed, the immune system can no longer attack and destroy pathogens.



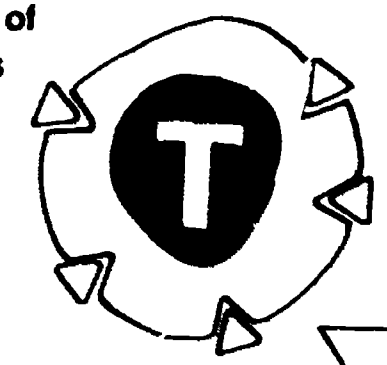
T cell, a type of white blood cell



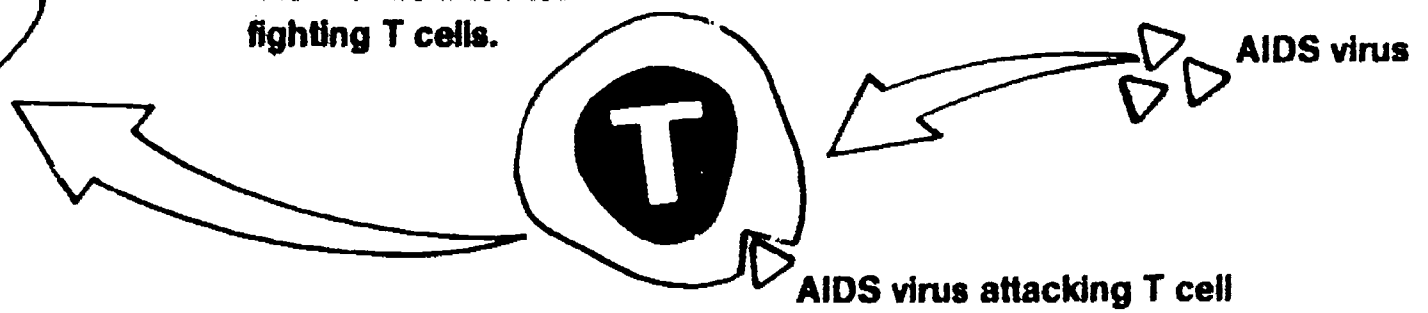
1. Our immune system constantly produces cells and antibodies that destroy pathogens to which we are exposed everyday.



Reproduction of the AIDS virus



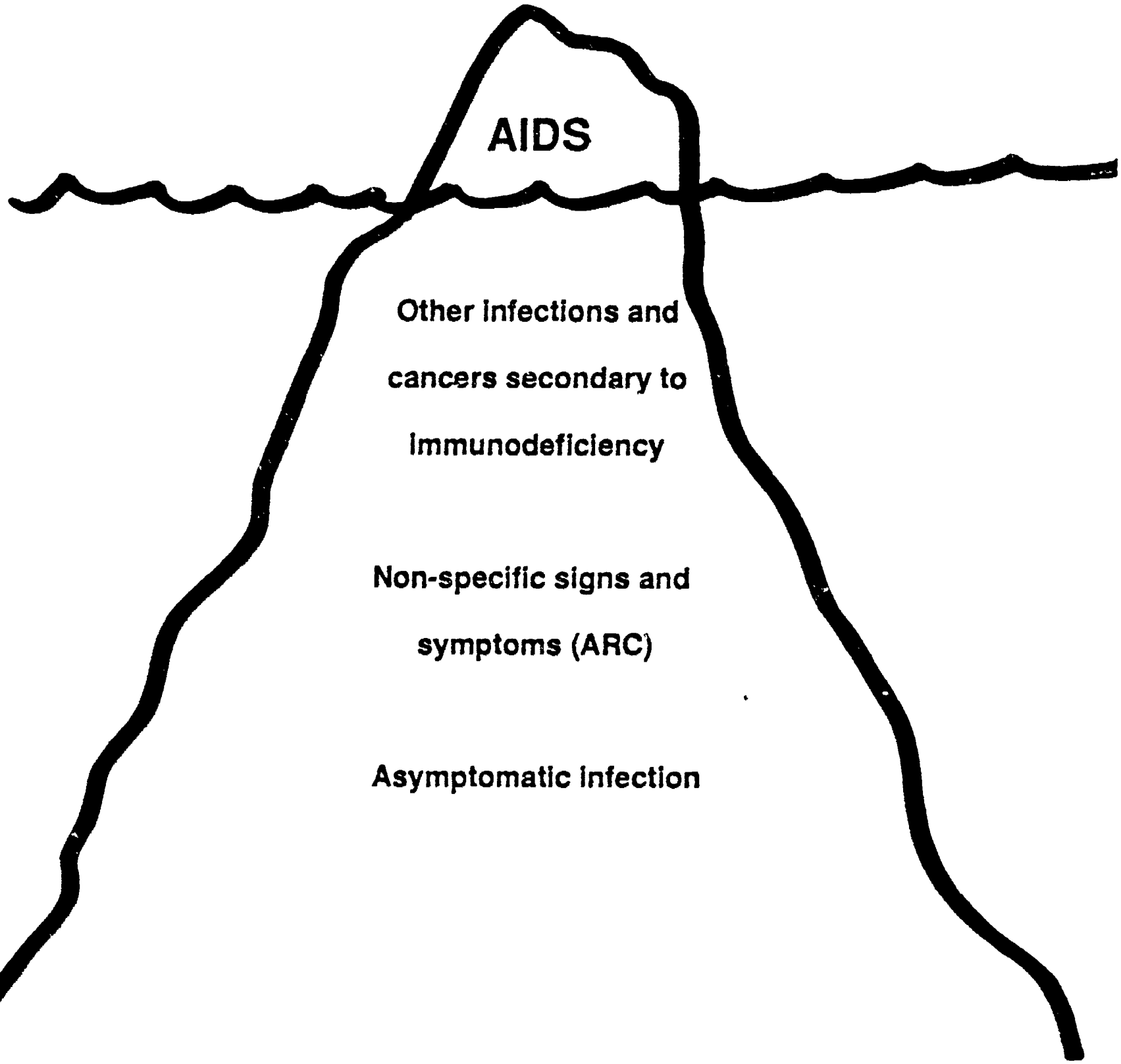
2. When the AIDS virus invades the body, it attacks the infection-fighting T cells.



AIDS virus attacking T cell

AIDS

TIP OF THE ICEBERG



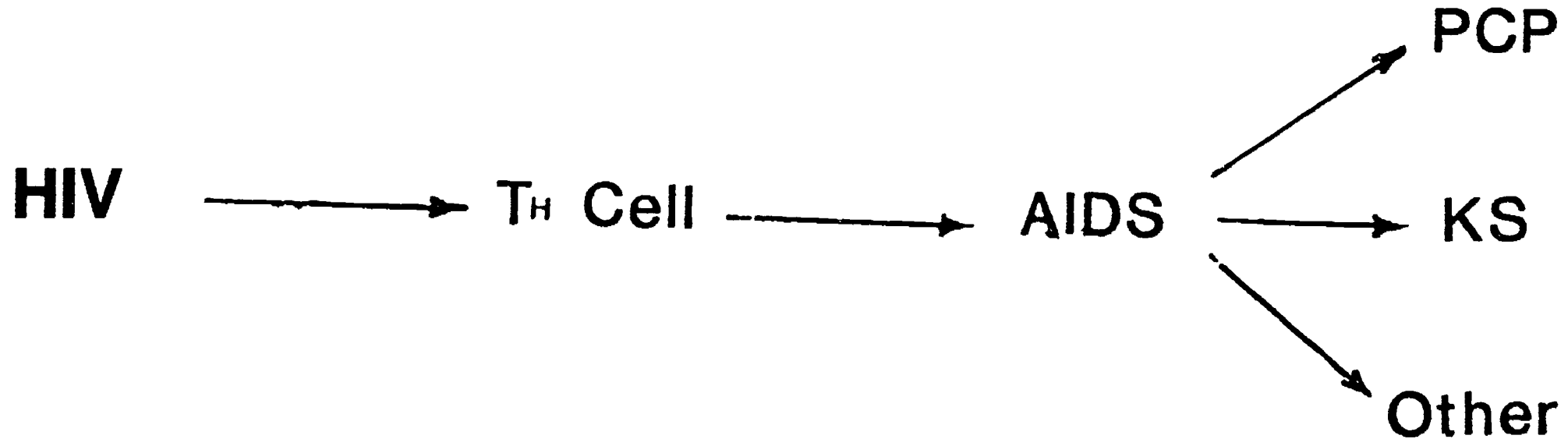
AIDS

THE VIRUS

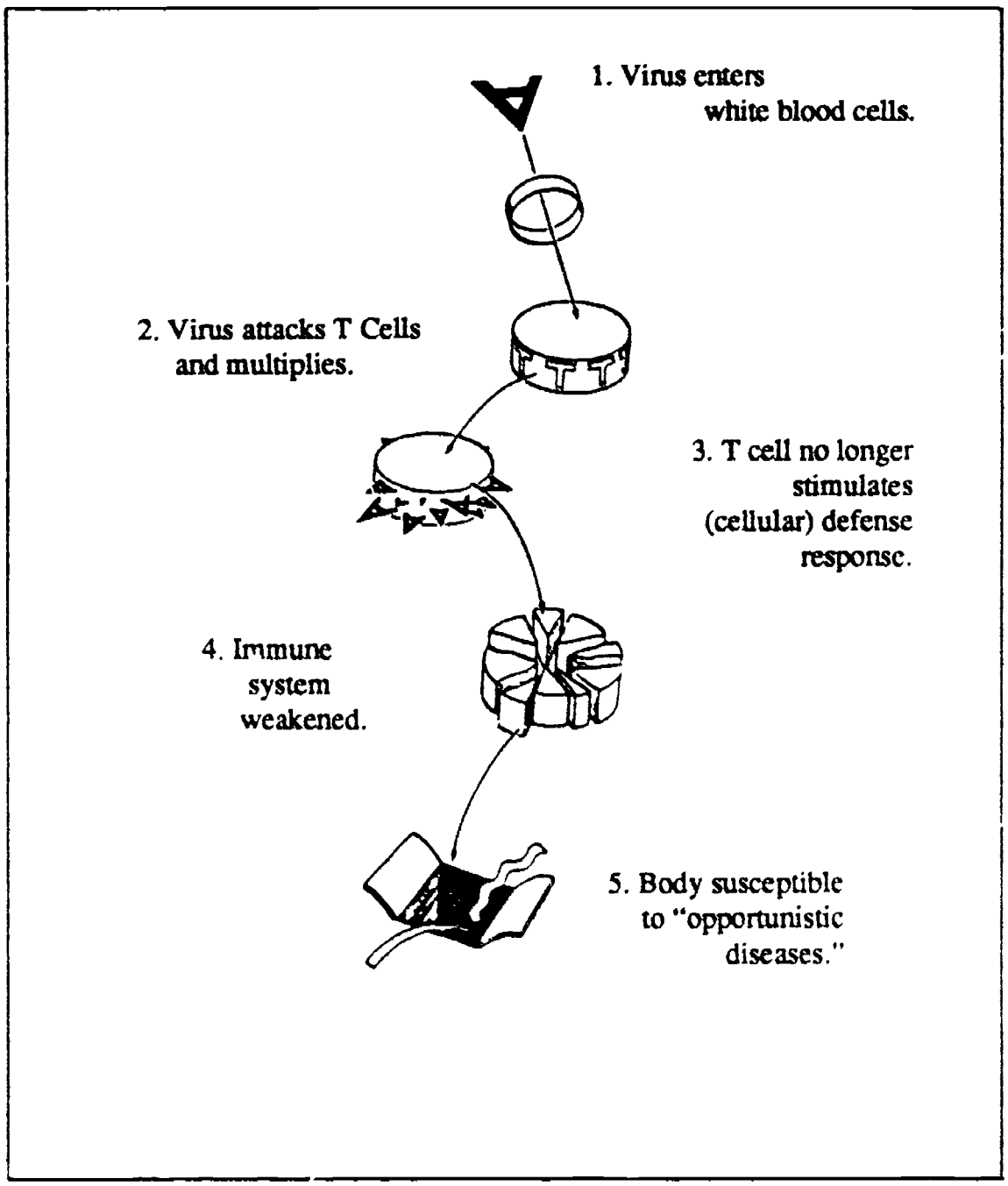
- UNSTABLE IN ENVIRONMENT
- DIFFICULT TO GROW IN CULTURE
- INACTIVATED BY:
  - Lysol
  - Diluted Chlorox
  - Alcohol
  - Heat
  - Formaldehyde
  - Halogenated soap
  - High, low pH
  - Peroxide
- Must be "injected" so it can find a Th Lymphocyte

AIDS

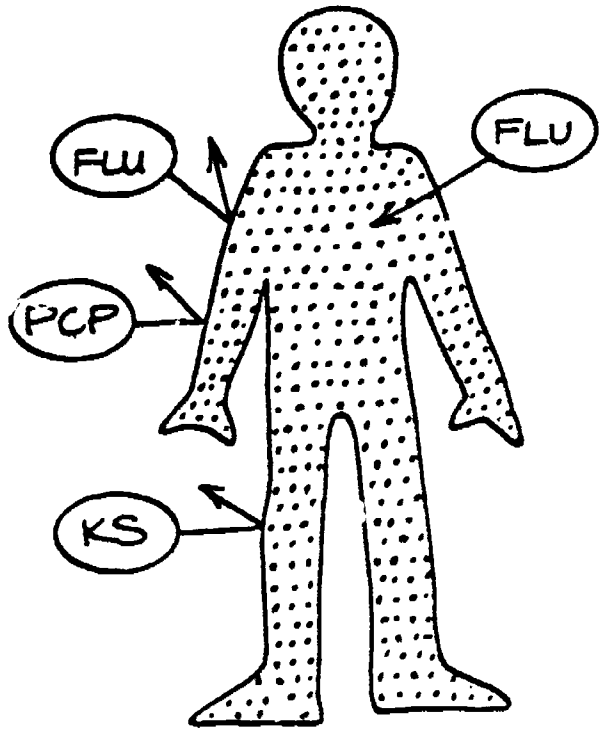
How The Virus Does Its Damage



WHAT HAPPENS WHEN THE AIDS VIRUS ENTERS THE BODY?



THE HEALTHY IMMUNE SYSTEM



The body's immune system can always fight off certain diseases, including PCP and KS. It can usually, but not always, fight common colds or flu.

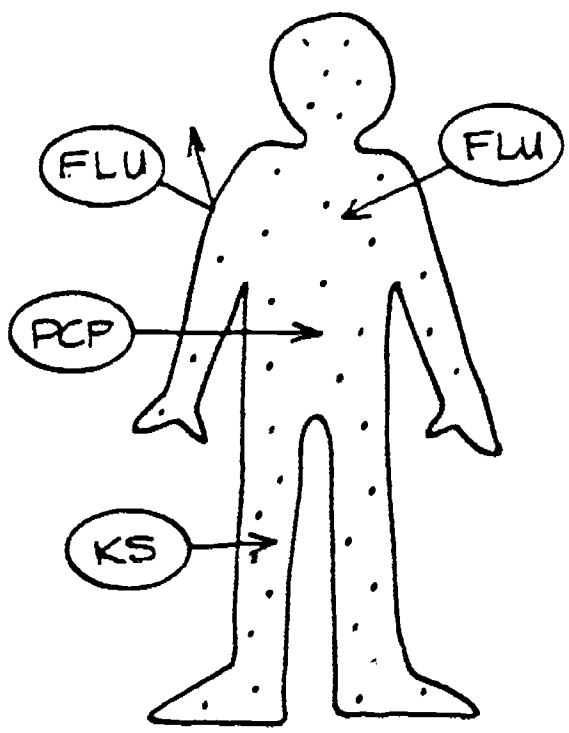
Helper T-cells: special cells in the immune system which alert the body to invasion by diseases.

FLU - Common viral colds or flus.

PCP - Pneumocystis carinii pneumonia: a disease seen in some people with AIDS.

KS - Kaposi's sarcoma: also seen in some people with AIDS.

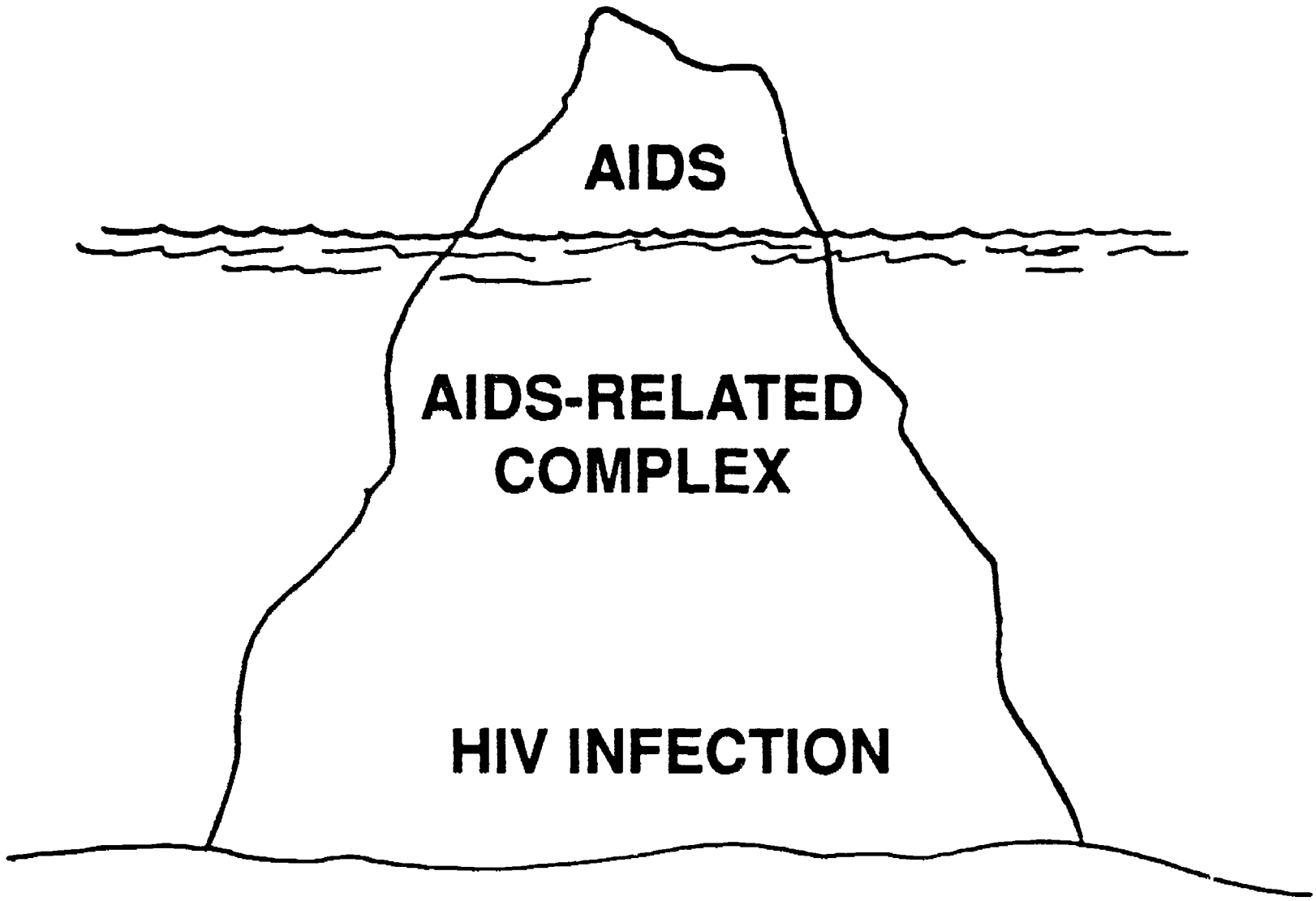
THE IMMUNE SYSTEM INFECTED WITH AIDS



The AIDS virus has destroyed most of the helper T-cells.

The body cannot fight off diseases like PCP and KS. It can sometimes, but not always, fight common colds and flu.

SPECTRUM OF CONSEQUENCES FROM HIV INFECTION 'ICEBERG PHENOMENON'



RESPONSIBLE DECISION MAKING

1. **Identify the situation.**

2. **Identify the different decisions you might make to resolve the situation.**

3. **Ask questions about each possible decision.**

   - **Would the results of my decision be healthful?**
   - **Would the results of my decision be safe?**
   - **Would the results of my decision be legal?**
   - **Would the results of my decision show respect for myself and others?**
   - **Would the results of my decision follow my parents' or guardian's guidelines?**

4. **Make a responsible decision and act upon it.**

5. **Evaluate your actions.**

REFUSAL SKILLS

Refusal skills are ways to say no to risk behaviors. Refusal skills may include the following:

- **Give reasons why saying no is a responsible choice. "I do not want to harm my health."**

- **Use your behavior to show you mean what you say. Avoid being alone with someone who tries to convince you to be sexually active.**

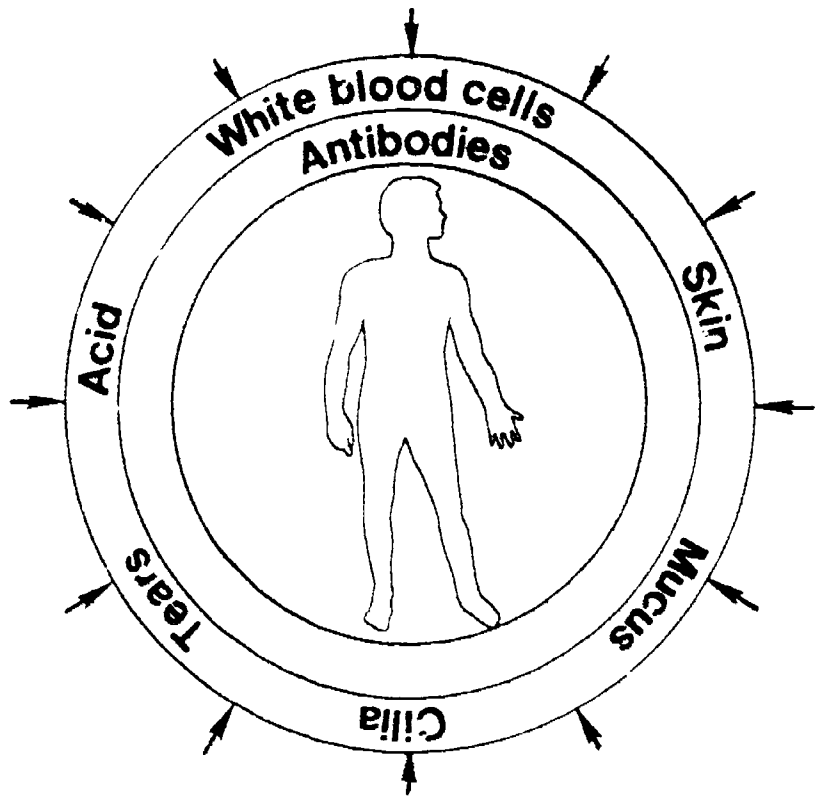
- **Encourage others to choose healthful and responsible behaviors. "We could choose many healthful activities that do not involve drugs."**

- **Use self-control and stick to your decision.**

- **Remove yourself from the situation. "I am not going to participate in this activity. I am leaving now."**

BODY DEFENSES

- **Skin**—first line of defense; when unbroken it acts as a barrier
- **Mucous membranes**—protective linings of body openings
- **Mucus**—sticky protective coating produced by mucous membranes; traps pathogens
- **Cilia**—hairlike projections in the nose and throat; trap pathogens
- **Tears**—protect eyes by continually washing them and keeping pathogens from entering the eyes
- **Stomach acids**—destroy pathogens ingested with foods
- **White blood cells**—surround and destroy pathogens
- **Antibodies**—chemicals produced in the blood that destroy pathogens



AIDS VIRUS

IS TRANSMITTED BY:

- BLOOD
- VAGINAL SECRETIONS
- SEMEN
- BREAST MILK [RARELY]

AIDS VIRUS

IS FOUND IN, BUT NOT TRANSMITTED BY:

- SALIVA
- TEARS
- URINE
- BRAIN TISSUE

AIDS

IS A BLOOD BORNE SEXUALLY TRANSMITTED DISEASE

AIDS TRANSMITTED:

SEXUAL CONTACT

SHARING NEEDLES

MATERNAL/FETAL

CONTAMINATED BLOOD AND BLOOD PRODUCTS

AIDS

A VIRAL INFECTION THAT DESTROYS THE BODY'S IMMUNE SYSTEM ALLOWING OTHER INFECTIONS TO DEVELOP

AIDS

CAUSE: A VIRUS

HIV

HUMAN IMMUNODEFICIENCY VIRUS

AIDS RISK GROUPS

HOMOSEXUALS

IV DRUG USERS

GAY/BISEXUAL IV DRUG USERS

HETEROSEXUALS

INFANTS OF INFECTED MOTHERS

AIDS VIRUS

IS TRANSMITTED THROUGH:

- SEXUAL CONTACT
- INJECTION - ILLICIT OR ACCIDENTAL
- MOTHER TO CHILD
  - PREGNANCY OR CHILD BIRTH
- TRANSFUSION OF INFECTED BLOOD OR BLOOD PRODUCTS

SYMPTOMS OF AIDS

Lasting 1 month or more:

- TIREDNESS
- SWOLLEN LYMPH GLANDS
- WEAKNESS
- FEVER
- DIARRHEA
- NIGHT SWEATS
- LOSS OF APPETITE AND WEIGHT

AIDS

A - ACQUIRED

I - IMMUNE

D - DEFICIENCY

S - SYNDROME

MISCONCEPTIONS ABOUT AIDS

AIDS IS NOT TRANSMITTED THROUGH:

- CASUAL CONTACT SUCH AS HANDSHAKES
- OBJECTS SUCH AS TOILET SEATS OR DOOR KNOBS
- COUGHING OR SNEEZING
- MOSQUITOES OR FLEAS
- HUGGING
- FOOD

RESOURCES

RESOURCE LIST

Due to the nature of AIDS and the fact that some of the materials might offend individuals or groups, materials should be screened to determine appropriateness. The Arizona Department of Education and the Arizona Department of Health Services do not require or endorse the use of any particular resource materials, but are offering this listing as a means of assisting those involved in the teaching of AIDS on the identification of resource materials. Because new materials are being introduced daily, this resource list may not represent a complete listing of materials available.

AGENCIES

AMERICAN COLLEGE HEALTH ASSOCIATION
Task Force on AIDS
15879 Crabbs Branch Way
Rockville, MD 20855
(301) 963-1100

Free pamphlet, AIDS: What Everyone Should Know; free catalog of books and videos.

AMERICAN RED CROSS
AIDS Education Office
1730 D Street, N.W.
Washington, DC 20006
(202) 737-8300

Provides information and materials about AIDS.

AMERICAN RED CROSS
Central Arizona Chapter
1510 E. Flower St.
P.O. Box 17090
Phoenix, AZ 85011
(602) 264-9481

Provides various AIDS informational pamphlets, video presentations and AIDS education speakers to the general public.

AMERICAN RED CROSS
Office of Public Affairs
National Headquarters
Washington, DC 20006
(202) 639-3222

Health Line - Publications and information concerning criteria for blood donors eligibility and indications for transfusions.

AMERICAN SOCIAL HEALTH ASSOCIATION
260 Sheridan Avenue, Suite 307
Palo Alto, CA 94306

Free pamphlet, Teacher's Guide to STDs.

APACHE COUNTY HEALTH DEPARTMENT
P.O. Box 697
St. Johns, AZ 85936
(602) 337-4364

ARIZONA DEPARTMENT OF HEALTH SERVIC
Division of Disease Prevention
3008 N. 3rd St.
Phoenix, AZ 85012
(602) 230-5843

Maintains disease surveillance activities and coordinates the Arizona AIDS Task Force, a group of state, county and private health professionals and community leaders to develop effective responses to AIDS.

ARIZONA DEPARTMENT OF HEALTH SERVICES
Office of Health Promotion and Education
3008 N. 3rd St.
Phoenix, AZ 85012
(602) 230-5833

Coordinates public and professional education activities.

COCHISE COUNTY HEALTH DEPARTMENT
P.O. Box 1658
Bisbee, AZ 85603
(602) 432-5703

COCONINO COUNTY HEALTH DEPARTMENT
2500 N. Ft. Valley Rd.
Flagstaff, AZ 86001
(602) 779-5164

GILA COUNTY HEALTH DEPARTMENT
621 S. 5th St.
Globe, AZ 85501
(602) 425-5721

GRAHAM COUNTY HEALTH DEPARTMENT
826 W. Main
Safford, AZ 85546
(602) 428-0110

GREENLEE COUNTY HEALTH DEPARTMENT
P.O. Box 936
Clifton, AZ 85533
(602) 865-2601

LA PAZ COUNTY HEALTH DEPARTMENT
916 12th St.
Parker, AZ 85344
(602) 669-6155

MARICOPA COUNTY HEALTH DEPARTMENT
902 N. 24th St.
Phoenix, AZ 85006
(602) 267-0568

Administers AIDS antibody testing and provides counseling and in-service education.

MARICOPA COUNTY HEALTH DEPARTMENT
Bureau of Disease Control
1825 E. Roosevelt
Phoenix, AZ 85008
(602) 258-6381, Ext 261

Provides medical information on AIDS and epidemiologic investigations. Speakers bureau available.

MOHAVE COUNTY HEALTH DEPARTMENT
305 W. Beale
Kingman, AZ 86401
(602) 757-0748

NATIONAL AIDS NETWORK
1012 14th St., NW, Suite 601
Washington, DC 20005

Resource directories available.

NAVAJO COUNTY HEALTH DEPARTMENT
P.O. Box 639
Holbrook, AZ 86025
(602) 524-6825

PIMA COUNTY HEALTH DEPARTMENT
151 W. Congress
Tucson, AZ 85710
(602) 792-8315

Provides counseling and in-service education to health care institutions and community groups.

PINAL COUNTY HEALTH DEPARTMENT
P.O. Box 807
Florence, AZ 85232
(602) 868-5801

PLANNED PARENTHOOD OF CENTRAL AND NORTHERN ARIZONA
5651 N. 7th Street
Phoenix, AZ 85014
(602) 277-7526

Provides testing, counseling, information and community education programs.

PLANNED PARENTHOOD OF SOUTHERN ARIZONA
127 S. 5th Ave.
Tucson, AZ 85701
(602) 624-1761

Provides testing, counseling, information and community education programs.

SAN FRANCISCO AIDS FOUNDATION
333 Valencia St.
San Francisco, CA 94103

Publishes AIDS Educator and a resource directory (free).

SANTA CRUZ COUNTY HEALTH DEPARTMENT
1025-B Bejarano St.
Nogales, AZ 85621
(602) 287-4901

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control
1600 Clifton Rd., NE
Atlanta, Georgia 30333

Pamphlets and reports (free).

YAVAPAI COUNTY HEALTH DEPARTMENT
930 Division Street
Prescott, AZ 86301
(602) 778-9282

YUMA COUNTY HEALTH DEPARTMENT
201 Second Ave.
Yuma, AZ 85364
(602) 782-4534

All of the following National Organizations have materials, information and/or provide services relative to AIDS education. Contact the individual organizations for listings, costs and ordering information.

AMERICAN ALLIANCE FOR HEALTH, PHYSICAL EDUCATION, RECREATION AND DANCE
1900 Association Drive
Reston, VA 22304
(703) 476-3437

AMERICAN ASSOCIATION OF SCHOOL ADMINISTRATORS
P.O. Box 1801 North Moore Street
Arlington, VA 22209
(703) 528-0700

AMERICAN MEDICAL ASSOCIATION
535 N. Dearborn
Chicago, IL 60610
(312) 645-4987

AMERICAN SCHOOL HEALTH ASSOCIATION
National Office
P.O. Box 708
Kent, OH 44240
(216) 678-1601

AMERICAN SOCIAL HEALTH ASSOCIATION
P.O. Box 13827
Research Triangle Park, NC 27709
(415) 321-5134

CENTER FOR POPULATION OPTIONS
1012 14th St., NW, Suite 1200
Washington, DC 20005
(202) 347-5700

COUNCIL OF CHIEF STATE SCHOOL OFFICERS
Resource Center on Educational Equity
400 N. Capitol St., NW, Suite 379
Washington, DC 20001
(202) 393-8159

ETR ASSOCIATES
P.O. Box 1830
Santa Cruz, CA 95061
(408) 429-9823

NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION
701 N. Fairfax St., Suite 340
Alexandria, VA 22314
(703) 979-2823

NATIONAL COALITION OF ADVOCATES FOR STUDENTS
100 Boylston St., Suite 737
Boston, MA 01116
(617) 357-8507

NATIONAL COALITION OF HISPANIC HEALTH & HUMAN SERVICES ORGANIZATION
1030 15th St., NW, Suite 1053
''ashington, DC 20005
, 02) 371-2100

NATIONAL NETWORK OF RUNAWAY AND YOUTH SERVICE, INC.
906 6th St., SW, Suite 411
Washington, DC 20024
(202) 448-0739

NATIONAL ORGANIZATION OF BLACK COUNTY OFFICIALS
440 First St., NW, Suite 412
Washington, DC 20001
(202) 347-6953

THE NATIONAL PTA
700 N. Rush St.
Chicago, IL 60611
(312) 787-0977

NATIONAL RURAL AND SMALL SCHOOLS CONSORTIUM
National Rural Development Institute
Miller Hall 359, Western Washington University
Bellingham, WA 98225
(206) 676-3576

NATIONAL SCHOOL BOARDS ASSOCIATION
1680 Duke St.
Alexandria, VA 22314
(703) 838-6765

BOOKS AND PAMPHLETS

U.S. SURGEON GENERAL'S REPORT ON ACQUIRED IMMUNE DEFICIENCY SYNDROME
AIDS
P.O. Box 14252
Washington, DC 20044
(202) 245-6867

This 36-page booklet provides basic facts about the disease and lists organizations around the country where people can get more information. (free)

BLOOD SYSTEMS, INC.
Public Information
Corporate Headquarters
6210 E. Oak St.
Scottsdale, AZ 85257
(602) 946-4201

Provides publications and information concerning criteria for blood donors eligibility and indications for transfusions.

AIDS INFORMATION
U.S. Public Health Service
Room 721-H, HHH Building
200 Independence Avenue, SW
Washington, DC 20201
(202) 245-6867

Provides AIDS information materials and periodic updates on AIDS for lay and professional public.

AIDS FEAR AND FACTS, 1986 (No. 639)
Public Affairs Pamphlets
381 Park Avenue South
New York, NY 10016
(212) 683-4331

This 28-page pamphlet gives an overview of the illness AIDS. Studies are cited that can dispel misconceptions regarding transmission. ($1.00)

AIDS: IMPACT ON THE SCHOOLS, 1986
Capitol Publications
1300 N. 17th St., Box 9672
Arlington, VA 22209
(703) 528-5400

A report regarding facts about the disease, litigation, community case studies and school policy development.

AIDS IN THE PUBLIC SCHOOLS, 1986
National School Boards Association
1680 Duke St.
Alexandria, VA 22314
(703) 838-6722

This 52 page report covers medical and legal facts about the illness, as well as policy issues for schools. ($15.00)

FACTS ABOUT AIDS, Winter, 1986
U.S. Public Health Service
Room 721-H, HHH Building
200 Independence Avenue, SW
Washington, DC 20201
(202) 245-6867

A pamphlet that answers basic questions. (free)

WHAT EVERYONE SHOULD KNOW ABOUT AIDS, 1987
AIDS INFORMATION FOR YOUNG PEOPLE, 1987
Channing L. Bete Co., Inc.
South Deerfield, MA 01373
(800) 628-7733

Two 15-page illustrated booklets that explain what AIDS is, the cause, how the immune system works, transmission and prevention. AIDS Information For Young People is written at the fourth grade level. (free)

THE ESSENTIAL AIDS FACT BOOK, 1987
Paul Harding Douglas and Laura Pinsky
Pocket Books
1230 Avenue of the Americas
New York, NY 10020

Basic facts about AIDS in easy to read format. ($3.95)

HOW TO TALK TO YOUR CHILDREN ABOUT AIDS
SIECUS
New York University
32 Washington Place
New York, NY 10003

Four-page booklet for parents of pre-school to high school age children. Provides suggestions for parents on how to discuss AIDS at home. (free)

HEALTHLINK
National Center for Health Education
30 E. 29th St.
New York, NY 10016

Newsmagazine published by the National Center of Health Education to inform and link professionals and volunteers who foster better health through education. Subscription rate is $40.00 per year.

TEACHING MATERIALS

COMBINED HEALTH INFORMATION DATABASE (CHID)
Centers for Disease Control
Center for Health Promotion and Education
Division of Health Education
School Health Education Subfile
Atlanta, GA 30333
(404) 329-3492

The new AIDS School Health Education Subfile of CHID contains descriptions of school programs, curricula, guidelines, policies, regulations, and materials. Contact if you wish to submit materials for this subfile. See next entry to purchase materials from subfile.

NATIONAL CENTER FOR HEALTH EDUCATION
(212) 689-1886

Will design, conduct and mail customized search of AIDS information and CHID resources within 24 hours: $1.00 per computer minute for NCHE Associates and $1.50 per computer minute for non-Associates. Order by calling the Resource Bank at number listed above.

MORBIDITY AND MORTALITY WEEKLY REPORT
Department of Health & Human Services
Public Health Service
Centers for Disease Control
Atlanta, GA 30333

Guidelines for Effective School Health Education to Prevent the Spread of AIDS, January 29, 1988/Vol. 37/No. S-2. (free)

AIDS: WHAT YOUNG ADULTS SHOULD KNOW
Yarber, William L.
American Alliance Publications
P.O. Box 704
Waldorf, MD 20601

Guides which contain a knowledge and attitude test, glossary and an emphasis on preventive health behaviors. (Instructor's Guide - $8.95, Student Guide - $2.50)

AIDS AND THE EDUCATION OF OUR CHILDREN
U.S. Department of Education
Consumer Information Center
Dept. ED
Pueblo, CO 81009

A guide for parents and teachers. (free)

EDUCATOR'S GUIDE TO AIDS AND OTHER STD'S, 1987
Stephen R. Sroka
Health Education Consultants
1284 Manor Park
Lakewood, OH 44107
(216) 521-1766

The guide presents abstinence as the most effective method of preventing AIDS, and it emphasizes responsible sexual behavior and prevention of drug use. Contains basic information about AIDS and sexually transmitted disease (STD) infections. ($25.00)

AIDS: WHAT YOU SHOULD KNOW, 1987
Linda Meeks and Philip Heit
Merrill Publishing Co.
P.O. Box 508
Columbus, OH 43216
(800) 848-6205

This 27-page booklet is one of two in the Merrill Wellness Series and is designed for use with 6th, 7th and 8th grade students. Presents topically organized information on AIDS including origin, transmission, risks, behaviors, detection, treatment and research. The guide avoids explicit and detailed discussion of risky sexual practices and does not address the use of condoms. Students learn that abstinence is the most responsible decision they can make regarding both sexual activity and drug use. (Teacher's Guide - $6.00, Student Guide - $3.95)

AIDS EDUCATION: CURRICULUM AND HEALTH POLICY
William L. Yarber
Phi Delta Kappa
P.O. Box 789
Bloomington, IN 47402-0789

Designed to help schools develop an AIDS education curriculum focusing on preventive behaviors. Provides policy guidelines for dealing with AIDS victims in schools. Includes a comprehensive list of AIDS education resources. (.90)

AIDS VIRUS INFORMATION PACKAGE, 1986
Ohio Department of Health
Division of Health Promotion and Education
Box 118
Columbus, OH 43266-0188
(616) 466-0265

MEDICAL, PSYCHOLOGICAL AND SOCIAL IMPLICATIONS OF AIDS: A CURRICULUM FOR YOUNG ADULTS, 1985
SUNY AIDS Education Project
School of Allied Health Professionals
L2-052
Health Sciences Center
State University of New York
Stony Brook, NY 11794
(516) 444-3244

PRESENTING AIDS: A RESOURCE GUIDE FOR INSERVICE EDUCATION ON ACQUIRED IMMUNE DEFICIENCY SYNDROME AND EDUCATIONAL IMPLICATIONS
Minnesota Department of Education
550 Cedar St.
St. Paul, MN 55101

TEACHING ABOUT AIDS, 1986
AIDS Council of Northeastern New York
315 Hamilton St.
Albany, NY 12210

TEACHING AIDS: A RESOURCE GUIDE ON ACQUIRED IMMUNE DEFICIENCY SYNDROME
Marcia Quackenbush and Pamela Sargent
ETR Associates
1700 Mission St., Suite 203
P.O. Box 1830
Santa Cruz, CA 95061-1830
(408) 429-9822

STD: A GUIDE FOR TODAYS YOUNG ADULTS
American Alliance Publications
P.O. Box 704
Waldorph, MD 20601

SEXUALLY TRANSMITTED DISEASE TEACHERS GUIDE
American Social Health Association
260 Sheridan Ave.
Palo Alto, CA 94306

ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)
Department of Health Services
150 Washington St.
Hartford, CT 06106

AIDS: WHAT WE NEED TO KNOW
PRO-ED Publishing
5341 Industrial Oaks Blvd.
Austin, TX 78735
(512) 892-3142

Each level of the program includes one instructional program, one workbook for students and a sample parent booklet. AIDS-Level 1 Complete Program (grades 7-9) - $49.00. AIDS-Level II Complete Program (grades 10-12) - $59.00. Parent booklet (package of 5) - $9.00.

AIDS INFORMATION ARTICLES
American Red Cross
Central Arizona Chapter
1510 E. Flower St.
P.O. Box 17090
Phoenix, AZ 85011
(602) 264-9481

Information articles about AIDS that have been compiled by the Central Arizona Chapter of the American Red Cross. ($20.00)

FILMS AND VIDEOS

THE AIDS MOVIE
New Day Films
22 Riverview Dr.
Wayne, NJ 07470-3191
(201) 633-0212

Included is a Teachers Discussion Guide with the latest facts, discussion questions, vocabulary and resources of U.S. Public Health Services (CDC) - FACTS ABOUT AIDS. Film - $450.00, Video - $385.00, Rental - $57.00. Also available from the Arizona Department of Health Services at 255-1013.

AIDS ALERT
Creative Media Group, Inc.
123 Fourth St., NW
Charlottesville, VA 22901
(804) 296-6138

A 20 minute cartoon video that answers the most frequently asked questions in a direct yet non-threatening way. VHS, 1/2" - $125.00, 3/4" - $190.00, Rental - $45.00, Preview - $15.00.

AIDS IN YOUR SCHOOL
Perennial Education, Inc.
930 Pitner Ave.
Evanston, IL 60202
(800) 323-9084

A 23 minute program that discusses the aspects of AIDS which are relevant to teenagers including what AIDS is, transmission and prevention. Available in all video formats - $320.00, free preview.

UNDERSTANDING AIDS: THE SILENT ENEMY
Sunburst Communications
Room RH01
101 Castleton St.
Pleasantville, NY 10570-9971
(800) 431-1934

A program that presents a clear, objective summary of what is known about AIDS - what it is, where research into a cure or preventive vaccine now stands, and what treatment is available. Videocassette and teacher's guide - $165.00.

AIDS: THE DISEASE AND WHAT WE KNOW
Sunburst Communications
Room RH01
101 Castleton St.
Pleasantville, NY 10570-9971
(800) 431-1934

Tells the AIDS story in a non-threatening way, using a question and answer format and anxiety-reducing cartoons. Corrects misconceptions about AIDS and answers the questions most commonly asked. Videocassette and teacher's guide - $119.00, free preview.

AIDS: WHAT ARE THE RISKS?
Human Relations Media
Room GF1
175 Tompkins Ave.
Pleasantville, NY 10570-9973
(800) 431-2050

Provides a clear, step-by-step explanation of AIDS and its various methods of transmission. Also explores the social and psychological aspects of the disease from the perspective of family, friends and the AIDS patients themselves. Film - $115.00, videocassette - $139.00, free preview.

AIDS
Walt Disney
Educational Media Co.
Distributed by Coronet/MTI Film & Video
108 Wilmot Rd.
Deerfield, IL 60015
(800) 621-2131

Using computer animated graphics, this 20 minute film explains how the immune system works and how the AIDS virus affects the body. The film also explains how AIDS is and is not transmitted, and what precautions must be taken to avoid getting (or spreading) the disease. In addition, the film identifies high-risk groups for AIDS and emphasizes the importance of having compassion for those stricken with the disease. Film - $455.00, Video - $345.00, Rental - $75.00, free preview.

AIDS: OUR WORST FEARS
Films for the Humanities, Inc.
Box 2053
Princeton, NJ 08543
(800) 257-5126

This 57 minute documentary explains what we do and don't know about AIDS; who is most susceptible and most at risk; and what preventive actions and precautions can be taken. Videocassette - $179.00

AIDS FACE TO FACE
Films for the Humanities, Inc.
Box 2053
Princeton, NJ 08543
(800) 257-5126

A 28 minute film featuring Phil Donahue as he visits the AIDS Ward at St. Clare's Hospital in New York for conversations with AIDS victims. Videocassette - $149.00.

AIDS: ARE YOU AT RISK?
Films for the Humanities, Inc.
Box 2053
Princeton, NJ 08543
(800) 257-5126

This 19 minute program examines how AIDS is transmitted and how it works to break down the body's defenses to pave the way for fatal illnesses like Kaposi's sarcoma and Pneumocystis carninii pneumonia. The program profiles Don Miller, and AIDS patient battling discrimination against AIDS patients. Videocassette - $149.00.

AIDS: LEARN FOR YOUR LIFE
All Media Productions
Educational Division
1424 Lake Dr., SE, Suite 222
Grand Rapids, MI 49501
(616) 459-9703

Video and curriculum - $350.00. Also available from the Arizona Department of Health Services at 255-1013.

AIDS - ANSWERS FOR YOUNG PEOPLE
Churchill Films
662 N. Robertson Blvd.
Los Angeles, CA 90069

$275.00

THE SUBJECT IS AIDS
O.D.N. Productions
74 Varick St., #304
New York, NY 10013
(212) 431-8923

An update and revision of SEX, DRUGS & AIDS. With an introduction by Surgeon General C. Everett Koop, this 18 minute video retains most of the original version but emphasizes sexual abstinence as an important option and primary means of AIDS prevention. Videocassette - $325.00, Rental - $75.00, Preview - $10.00. Also available from the Arizona Department of Health Services at 255-1013.

SEX, DRUGS AND AIDS
O.D.N. Productions, Inc.
74 Varick St., #304
New York, NY 10013
(212) 431-8923

This film, narrated by actress Rae Dawn Chong, includes interviews with people with AIDS, as well as discussions about sex with high school students. It emphasizes the importance of using condoms and other "safer sex" practices. Avoidance of IV drug usage and the importance of not sharing needles are stressed. Videocassette - $325.00, Rental - $75.00, Preview - $10.00.

AIDS: FEAR AND FACTS
National Audiovisual Center
8700 Edgeworth Dr.
Capitol Heights, MD 20743
(301) 763-1896

The U.S. Public Health Service tape answers the most often asked questions about AIDS: what causes AIDS, who is at risk and how it is spread. The tape comes with two guides.

BEYOND FEAR
Modern Talking Picture Service
5000 Park Street North
St. Petersburg, FL 33709
(813) 541-7571

This film is presented in three parts: the virus (cause of AIDS); the individual and the spread of the virus (prevention measures, such as condoms, selection of sexual partner, and avoidance of needle sharing); and the community (education, health services, school policy, the work place, and other issues). Also available from the American Red Cross, Central Arizona Chapter, 264-9481.

THE AIDS VIDEO - AIDS AND THE AMERICAN FAMILY
Medical Action Group
P.O. Box 5998
Chanute, KS 66720
(316) 431-0140

Also available from the Arizona Department of Health Services at 255-1013.

THE TRUTH ABOUT AIDS
THE IMMUNE SYSTEM
Educational Dimensions Group, 1985
P.O. Box 126
Stanford, CT 06904
(203) 327-4612

The two filmstrips and two cassettes come with a teacher's guide for the junior high/senior high level. The filmstrip discusses AIDS in a simple, direct manner. The unit on the immune system provides an introduction to this system and is background for information on AIDS.

AIDS: WHAT EVERYONE NEEDS TO KNOW
Churchill Films
662 N. Robertson Blvd.
Los Angeles, CA 90069
(800) 334-7830

Survey of the facts and myths about AIDS. Explains how AIDS destroys the immune system's ability to fight disease. Describes the symptoms and progress of the disease. The family of a person with AIDS tells how they cope with the problem. Also available from the Arizona Department of Health Services at 255-1013.

AIDS: FACTS AND FEARS, CRISIS AND CONTROVERSY
Guidance Associates, Inc.
Communications Park
Box 3000
Mount Kisco, NY 10549
(800) 431-1242

The video features on-site interviews with health care workers and public health care workers and public health officials who present accurate information about AIDS, how is is transmitted and how to reduce risks.

AIDS: TRACKING THE MYSTERY
National Audio Visual Center
8700 Edgewood Dr.
Capitol Heights, MD 20743

AIDS IN THE WORKPLACE
San Francisco AIDS Foundation
333 Valencia St.
Fourth Floor
San Francisco, CA 94103
(415) 864-4376

YOUR BIOLOGICAL GUIDE TO AIDS
MEN, WOMEN, SEX AND AIDS
LIFE, DEATH AND AIDS
IN THE MIDST OF LIFE
MAIN STREET: SEX AND AMERICAN TEENS
Films Incorporated
5547 N. Ravenswood Ave.
Chicago, IL 60640-1199

A LETTER FROM BRIAN
American Red Cross
Central Arizona Chapter
1510 E. Flower
Phoenix, AZ 85014

AIDS: SUDDENLY SEX HAS BECOME VERY DANGEROUS
Part I: Overview
Part II: For Students
Part III: For Parents and Teachers
Goodday Video Productions
115 N. Esplanade St.
Cuero, TX 77954
(800) 221-1426

UNDERSTANDING & PREVENTING AIDS
Educational Associates
C/O Bob Painter
P.O. Box 35397
Phoenix, AZ 85069
(602) 234-1762

This sensitively produced, sophisticated program presents a topic many educators find difficult to teach for its sexual nature, and problems in religious and ethical spheres. Divided into two parts, the first gives basic scientific information on the disease and dispels some common myths. The second discusses contraceptive devices that can be used to avoid contracting AIDS, and clearly states that for the teen age population, abstinance is the preferred method. VHS Cassette and Teacher's Guide - $45.00, free preview.

AIDS

Society for Visual Education, Inc.
C/O Sharon Painter
P.O. Box 35397
Phoenix, AZ 85069
(602) 234-1762

This program, in keeping with the research and education campaign against AIDS recommended by the National Academy of Sciences, addresses the basic facts of Acquired Immune Deficiency Syndrome. Produced in consultation with The American Red Cross, this program is an up-to-date program designed to serve as a springboard for discussion sessions. The teacher's guide is structured for grade level-specific discussion topics and optional follow-up. Film Strip and Guide - $35.00, VHS and Guide - $39.00. The filmstrip is also available in Spanish - $41.00.

DISEASE TRANSMISSION PREVENTION

DISEASE TRANSMISSION PREVENTION

INFORMATION AND GUIDELINES FOR SCHOOL PERSONNEL

In 1981, the first cases of acquired immunodeficiency syndrome (AIDS) were reported in the United States. The human immunodeficiency virus (HIV) that causes AIDS and the HIV-related diseases precipitated an epidemic unprecedented in modern history. Since the virus is transmitted almost exclusively by behavior that individuals can modify (e.g., sexual contact with an infected person or sharing intravenous drug paraphernalia with an infected person), educational programs to influence relevant behavior can be effective in preventing the spread of HIV. Schools need to implement various policies to prevent the transmission of disease in the school setting.

An important part of prevention involves simple and effective precautions against transmission of disease. The following guidelines will assist school personnel in the development or updating of disease transmission prevention policies and procedures. These guidelines will address prevention of various communicable diseases (both diagnosed and undiagnosed) in the school setting.

Universal Precautions In The School Setting

On August 21, 1987, the Centers for Disease Control (CDC) issued the report, "Recommendations for Prevention of HIV Transmission in Health Care Settings". The material for this report was developed in collaboration with the Center for Prevention Services, the National Institute for Occupational Safety and Health and the Training and Laboratory Office. The recommendations contained in this document were developed for use in health care settings and emphasize the need to treat blood and other body fluids from all patients as potentially infective. Likewise, the recommendations emphasized that prudent precautions should be taken in other settings in which persons may be exposed to blood or other body fluids, such as schools.

The following "Universal Precautions" for infection control has been excerpted from this report and adapted for the school setting and school health nurses. These precautions are applicable to other communicable diseases as well. It is very important that each school, along with the school nurse and/or the school medical advisor, consider these precautions when developing and updating the Communicable Disease and AIDS policies and procedures for their local school or district.

Universal Precautions

Since medical history and examination cannot reliably identify all person infected with HIV or other blood-borne pathogens, blood and body fluid precautions should be consistently used for all persons. This approach,

previously recommended by CDC and referred to as "universal blood and body fluid precautions" or "universal precautions", should be used in the care of all persons, especially those in emergency care settings in which the risk of blood exposure is increased and the infection status of the person is usually unknown.

1. All school health nurses and school personnel performing school health care and first aid duties should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when contact with blood or other body fluids of any student or school personnel is anticipated. Gloves should be worn for touching blood and body fluids, mucous membranes, or non-intact skin of all persons and for handling items or surfaces soiled with blood or body fluids. Gloves should be changed after contact with each person.

2. Hands and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands should be washed immediately after gloves are removed.

3. All school health nurses and school personnel should take precautions to prevent injuries caused by needles and other sharp instruments or devices used during procedures or laboratory experiments; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures or laboratory experiments. To prevent needle stick injuries, needles should not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After use, disposable syringes and needles and other sharp items should be placed in puncture-resistant containers for disposal. The puncture-resistant containers should be located as close as practical to the use area.

4. Saliva has not been implicated in HIV transmission, but as a general precaution, mouthpieces, resuscitation bags or other ventilation devices should be available for use in each school health office, or in other areas where resuscitation may be needed.

5. School health nurses and school personnel who have exudative lesions or weeping dermatitis should refrain from all direct student/personnel care and from handling student/personnel care equipment until the condition resolves.

6. Pregnant women are not at increased risk of contracting HIV infection; however, if a pregnant women develops HIV infection during pregnancy, the infant is at risk of infection resulting from perinatal transmission. Because of this risk, pregnant school health nurses and pregnant school personnel should strictly adhere to precautions and thereby minimize the risk of HIV transmission.

Implementation of universal blood and body fluid precautions for all students and school personnel eliminates the need for use of the isolation category of "Blood and Body Fluid Precautions" previously recommended by CDC for persons known or suspected to be infected with blood-borne pathogens. Disease specific isolation precautions should be used as necessary if associated conditions, such as infectious diarrhea or tuberculosis, are diagnosed or suspected.

Transmission Concerns In The School Setting

The following section will address those most commonly asked questions in regards to disease transmission within the school setting.

Does Contact With Body Fluids Present A Risk?

Contact with body fluids presents a risk of infection; however, the risk is very low and depends on a variety of factors, including the type of fluid and type of contact made (3). The body fluids of all people should be considered to contain potentially infectious agents. The term "body-fluids" includes blood, semen, drainage from scrapes and cuts, feces, urine, vomitus, respiratory secretions (such as nasal discharge) and saliva.

The table, "Transmission Concerns in the School Setting-Body Fluids as Sources of Infectious Agents", provides examples of particular organisms that may occur in body fluids of children and the respective transmission concerns. It must be emphasized that many of the body fluids with which one may come in contact usually contain many organisms, some of which may cause disease. Furthermore, many organisms may be carried by individuals who have no symptoms of illness. These individuals may be at various stages of infection: incubating disease, mildly infected without symptoms, or chronic carriers of certain infectious agents including the Human Immunodeficiency Virus (HIV) and Hepatitis B virus. In fact, because simple precautions are not always carried out, transmission of communicable diseases is more likely to occur from contact with infected body fluids of unrecognized carriers than from those of recognized disease sufferers.

What Should Be Done To Avoid Contact With Body Fluids?

If possible, avoid contact with body fluids and allow student or school staff person to clean own injury. If this is not possible, it is recommended that gloves be worn when direct hand contact with the body fluid is anticipated (e.g., changing diapers, handling clothes soiled by blood or incontinence, treating bloody noses or open wounds, cleaning small spills by hand or cleaning mops used for cleaning up vomitus, blood, urine or feces). Disposable gloves should be kept in the offices of the nurse, the custodian, the cafeteria manager, the principal and other areas as appropriate. Gloves should be made available for all playground aides and be placed in each classroom's first aid kit. In those schools with preschools or special education students who require diapering, gloves and handwashing facilities should be available in all changing rooms and the following diaper changing procedure should be followed.

TRANSMISSION CONCERNS IN THE SCHOOL SETTING - BODY-FLUIDS AS SOURCES OF INFECTIOUS AGENTS

Body-Fluid/Source	Organism(s) Of Concern	Transmission Concern
Blood Cuts/abrasions Nosebleeds Menses Contaminated needles	Hepatitis B virus AIDS virus (HIV) Cytomegalovirus Non A, Non B Hepatitis	Bloodstream inoculation through cuts and abrasions on hands, bites Direct bloodstream inoculation
*Feces	Enteric Bacteria Salmonella Shigella Campylobacter Viruses Hepatitis A Rotavirus Others Protozoa Giardia Others	Oral inoculation from contaminated hands
Saliva	Cytomegalovirus (CMV) Mononucleosis Virus Epstein Barr	Kissing and oral inoculation from contaminated hands
*Urine	CMV	Oral inoculation from contaminated hands
Respiratory Secretions Nasal Discharge	Mononucleosis virus Chicken Pox, Rubella Common cold virus Influenza virus Hepatitis B virus	Oral inoculation from contaminated hands
*Vomitus	Unknown mode of transmission	Oral inoculation from contaminated hands
Semen	Hepatitis B AIDS virus (HIV) Gonorrhea Other STD's	Sexual contact (intercourse)

* Possible transmission of AIDS and Hepatitis B is of little concern from feces, urine, and vomitus. There is no evidence at this time to suggest that the AIDS virus (HIV) is present in these fluids unless blood is present. (4)

Diaper Changing Procedure

1. Wash changing table with soap and water solution and dry with a paper towel.

2. Sanitize the changing table with bleach water solution (sodium hypochlorite - household bleach - at a strength of 1 part bleach to 10 parts of water and place in a plastic squirt-type bottle) and dry with a paper towel. This bleach solution should be prepared fresh at least daily and should be kept in a covered container.

3. Apply gloves to hands.

4. Remove soiled diaper and dispose in a plastic-lined covered trash container.

5. Wash and cleanse perianal area and apply new diaper.

6. Return child to safe environment.

7. Wash changing table with soap and water solution.

8. Sanitize changing table with bleach water solution and dry with a paper towel.

9. Remove gloves and dispose in a plastic-lined covered trash container.

10. If the changing table top becomes contaminated with body fluids (e.g., blood, urine, saliva or feces), the bleach water solution should be left on the surface to be disinfected for 5-10 minutes before it is rinsed or wiped off.

11. Wash hands as in handwashing procedure.

12. Revitalize hands with lotion periodically.

Gloves should be worn and changed after contact with each student. Gloves should be disposed of in a plastic bag or plastic-lined trash container with a foot pedal lid release and disposed of daily. Hands should be washed immediately after gloves are removed.

Handwashing Procedure

1. Remove all jewelry.

2. Wet hands with warm running water.

3. Apply soap and lather well, using vigorous circular motion and friction for 10-30 seconds.

4. Wash all skin surfaces; fronts and backs of hands, wrists, between fingers and around and under fingernails.

5. Rinse hands well under running water.

6. Dry hands well with a clean paper towel.

7. Turn off faucet with the paper towel and discard paper towel in a foot pedal lid release trash container.

8. Apply lotion as needed to revitalize hands.

If Direct Skin Contact Occurs, What Should Be Done?

In certain instances, unanticipated skin contact may occur in situations where gloves are not immediately available (e.g., when wiping a runny nose, applying pressure to a bleeding injury outside the classroom, or helping a child in the bathroom). In these instances, hand and other affected skin areas of all exposed people should be washed with soap and water after direct contact has ceased.

How Should Clothing And Nondisposable Items Be Handled?

Clothing and other nondisposable items (such as towels used to wipe up body-fluids) that are soaked through with body fluids should be rinsed and placed in plastic bags for laundering and/or to be sent home. If presoaking is required to remove stains (e.g., blood, feces), use gloves to rinse or soak the item in cold water prior to bagging. Clothing should be sent home for washing with appropriate directions to parents/teachers (see launder instructions in this section).

Disinfection of vinyl cots in the school health office should occur routinely between student/school personnel use. These cots should be sanitized the same way as the vinyl changing table tops.

1. Wash vinyl cots with a soap and water solution (mixture placed in a plastic squirt-type bottle) and dry with a paper towel.

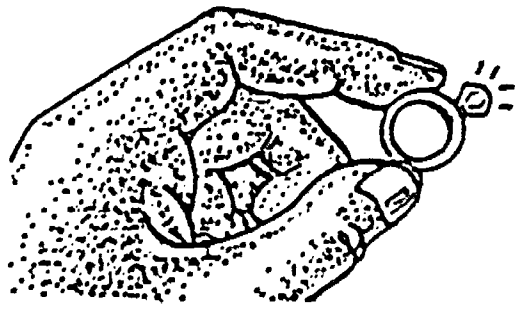
2. Sanitize vinyl cots with bleach water solution (sodium hypochlorite - household bleach - at a strength of 1 part bleach to 10 parts of water and placed in a squirt-type bottle) and dry with a paper towel. This solution should be prepared fresh at least daily and should be kept in a covered container.

3. When vinyl cots become contaminated with body fluids (e.g., blood, urine, saliva or feces), the bleach water solution should be left on the surface to be disinfected for 5-10 minutes before it is rinsed off or wiped off.

Glass thermometers are disinfected by a friction wash with cold water and soap and soaking in a container filled with the 1:10 hypochlorite solution (household bleach) for 20-30 minutes.

HANDWASHING–HOW AND WHY

1. Remove all jewelry. (before procedure)

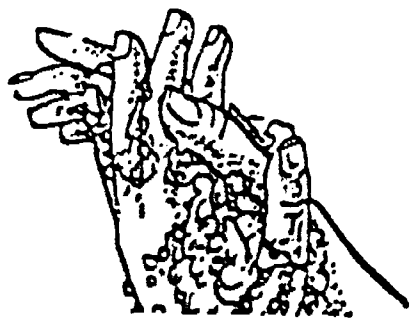


Microorganisms can become lodged in settings or stone[illegible] of rings.

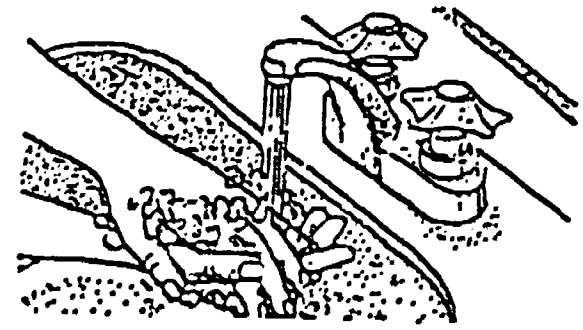
2. Wet hands with running water.

Running water is necessary to carry away dirt and debris.

3. Apply liquid soap a[illegible] lather well. Wash ha[illegible]ds for 15 to 30 seconds. Wash front and back, between fingers and around and under fingernails. Use circular motion and friction.

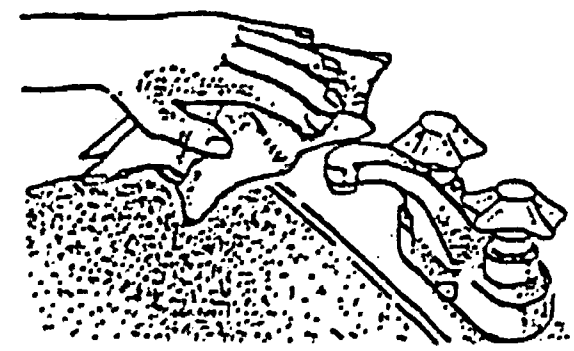


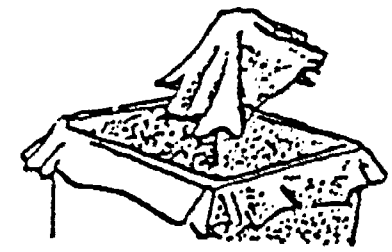
4. Rinse hands well under running water.



Water should drain from wrist area to fingertip.

5. Dry hands well with paper towel. Broken skin permits germs to enter. Dry gently. Avoid chapped skin breaks. Apply lotion as needed. Turn off water faucet with paper towel and discard towel.





Rugs which are contaminated by body fluids may be cleaned by applying a sanitary absorbent agent. Allow the agent to dry according to the directions, then vacuum. If necessary, mechnically remove the agent with a dust pan and brush, then apply rug shampoo (a germicidal detergent) with a brush and vacuum again. Soak the dust pan and brush in the 1:10 solution of sodium hypochlorite (household bleach) for 20-30 minutes. Dispose of non-reusable cleaning equipment as noted in section on disposable items (4).

How Should Disposable Items Be Handled?

Contaminated disposable items (such as tissues, paper towels, diapers, tampons, gauze pads) should be handled with disposable gloves and carefully discarded in leakproof plastic bags that are placed in a plastic-lined, foot pedal lid release trash container until ultimate disposal. Ultimate disposal is by incineration or placement in a properly supervised and maintained sanitary landfill.

How Should Spilled Body Fluids Be Removed From the Environment?

Most schools have standard procedures already in place for removing body fluids (such as vomitus). These procedures should be revised to insure that appropriate cleaning and disinfection steps have been included. Many schools stock sanitary absorbent agents specifically intended for cleaning body fluid spills (for example, ZGOOP* from Parsen Manufacturing Company in Philadelphia, Pennsylvania). Disposable gloves should be worn when using these agents. The dry material is applied to the area, left for a few minutes to absorb the fluid and then vacuumed or swept up. The vacuum bag or sweepings should be disposed of in a leakproof plastic bag. The brush and dust pan should be soaked in the 1:10 hypochlorite solution for 20-30 minutes. No special handling is required for vacuuming equipment (4).

*For identification only.

Is Sodium Hypochlorite The Only Disinfectant That Should Be Used?

No. There are various intermediate-level disinfectants that are effective in cleaning surfaces, contaminated with body fluids. Such disinfectants will kill vegetative bacteria, fungi, turberle bacillus and viruses. It is important that the disinfectant chosen is registered by the U.S. Environmental Protection Agency for use as a disinfectant in medical facilities and hospitals.

Various classes of disinfectants are listed below. Bleach (hypochlorite solution) is preferred for objects that may be put in the mouth.

- -Ethyl or isopropyl alcohol (70 percent).
- -Phenolic germicidal detergent in a one percent aqueous solution (such as Lysol*).
- -Sodium hypochlorite with at least 100 parts per million of available chlorine (one-half cup of household bleach in one gallon of water) - it needs to be freshly prepared daily.

-Quaternary ammonium germicidal detergent in two percent aqueous solution (e.g., Tri-quat*, Mytar*, or Sage*).
-Iodophor germicidal detergent with 500 parts per million of available iodine (such as Wescodyne*).

*Brand names are used only for examples of each type of germicidal solution and should not be considered an endorsement of any specific product.

How Should Cleaning Equipment Be Handled?

Mops should be soaked in a disinfectant for 20-30 minutes after use and rinsed thoroughly or washed in a hot water laundery cycle before rinsing. Disposable cleaning equipment and water solution should be discarded in a plastic bag or toilet as appropriate. Nondisposable cleaning euqipment (such as dust pans and buckets) should be soaked in the disinfectant for 20-30 minutes. This disinfectant solution should then be promptly disposed down a drain pipe. Remove gloves and discard them in a leakproof, plastic-lined foot pedal lid release trash container.

What Are The Laundry Instructions For Clothing Soiled With Body Fluids?

The most important factor in laundering clothing contaminated in the school setting is elimination of potentially infectious agents by using soap and water. Addition of bleach will further reduce the number of potentially infectious agents. Presoaking may be required for heavily soiled clothing. Otherwise, wash and dry as usual using gloves. If the material can be bleached, add one-half cup of household bleach to the wash cycle.

How Should Medical Instruments/Medication Equipment Be Handled?

Instruments such as tweezers and scissors should be soaked for 20-30 minutes in any of the intermediate level disinfectants registered by the U.S. Environmental Protection Agency (EPA) for use as a disinfectant in medical facilities and hospitals. Nebulizer mouthpieces and medication chambers should be soaked for 20-30 minutes in a sodium hypochlorite solution (household bleach) in a 1:10 concentration (1 part bleach to 10 parts of water). The hypochlorite solution is preferred for objects that are put in the mouth.

How Should Toys Be Handled That are Shared by Children?

No special precautions are necessary unless children, such as preschool or special needs children, have placed toys in their mouths. Mouth-to-mouth sharing of food and other objects (e.g., pencils, toys) between children is unhygienic and should be discouraged. If this does occur, toys that are mouthed by a child should be washed with warm soap and water followed by soaking in the hypochlorite bleach solution for 20-30 minutes. The toy should then be rinsed and dried.

Conclusion

The recommendations presented in this section were based upon the CDC "Recommendations for Prevention of HIV Transmission in Health Care Settings", August 21, 1987. While we know that the AIDS virus is NOT spread through the air by coughs, sneezes, drinking fountains, swimming pools, toilet seats, dishes, utensils or food, we do know that it is transmitted by blood, semen, vaginal secretions and possible breast milk. We also know that HIV is likely to be isolated from other body fluids, secretions and excretions.

Even though risk of infection is minimal in normal school settings, it it recommended that blood and body fluid precautions be followed. Thus, this section emphasizes that school health nurses and school personnel consider all students/school personnel as potentially infected with HIV and/or other blood-borne pathogens and adhere rigorously to infection-control precautions to minimize their risk of exposure to blood and body fluids.

References for Disease Transmission Prevention

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3. State of Connecticut. Department of Education and Department of Health Services. Prevention of Disease Transmission In Schools: Acquired Immune Deficiency Syndrome (AIDS), May 1986.

4. Brainerd, Elaine, "Handling Body Fluids in Schools", School Nurse, November/December, 1985, pg. 16-19.

5. Arizona Department of Health Services. Office of Infectious Disease Control Services, "AIDS-Acquired Immunodeficiency Syndrome, Information and Guidelines Regarding HTLV-III Infections", January 31, 1986.