

Model HIV/AIDS Education Curriculum for Practitioners

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KEYWORDS HIV/AIDS Education Activities. Curriculum. Development. Information. Communication

ABSTRACT The need for uniformity in HIV/AIDS education activities is indispensable, as education has been adjudged vital in HIV/AIDS prevention. This paper was an attempt to provide a comprehensive HIV/AIDS education curriculum. It is hoped that individuals, government and Non-government Organizations concerned with HIV/AIDS education will find this curriculum indispensable.

INTRODUCTION

The labeling of HIV/AIDS, the greatest pandemic of our time is as a result of its peculiar characteristics. It is distributed world wide, non discriminatory highly infectious/contagious, no cure or vaccine after over two decades of its existence and finally its spreading at an alarming rate. Currently, over 40 million people are estimated to be living with the virus (Barzelatto, 1994)

Several strategies have come on stream to stem the spread of HIV/AIDS since it came into existence. These range from drug development to information, education and communication. While these efforts have contributed immensely to the fight against HIV/AIDS, the HIV/AIDS education option seem to be gaining prominence. This probably is due to its focus – to influence knowledge attitudes and practices that lead to HIV/AIDS infection. Over the years educational efforts geared towards HIV/AIDS prevention have been massive. Initially focused on people considered to be “at risk” it has now extended to everybody. This is because everybody is now “at risk” in view of the epidemiology of HIV/AIDS. Furthermore, almost all segment of the society are now getting involved in HIV/AIDS education programmes. The governments – Federal, States, and Local, non-

governmental organizations, private establishments, individuals and communities.

Each body tends to be acting independently in developing its curriculum. While this is not entirely unacceptable, there is the need to have a model curriculum for reference and uniformity of activities. It is this gap that this paper sought to address. Using resources from Aidstech/FHI (not dated) -Amreef/Aidsaction. Aidscontrol Tanzania Aids Control Programme (1992), Barzelatto (1994).

This paper is therefore, an effort to come up with a comprehensive HIV/AIDS education curriculum adaptable by all practitioners. It is hoped that all the organizations and individuals involved with HIV/AIDS education will find this curriculum indispensable because education will continue to play a role in HIV/AIDS prevention even when the cure is found.

CONCLUSION

It should be acknowledged that the content of this model HIV/AIDS education curriculum does not provide an omnipotent solution to HIV/AIDS education problems. It's framework can form basis for adaptation, modification and replication for all HIV/AIDS education activities.

Topics	Performance objectives	Contents	Activities	Teaching materials	Evaluation
Introduction: Meaning of HIV/ AIDS. Brief History Of HIV/ AIDS, Relationship between HIV/ AIDS	Learners should be able to: I. Define HIV/ AIDS ii. Explain the origin of HIV AIDS iii. Describe the	1. Meaning of HIV/AIDS. 2. Origin of HIV/ AIDS. 3. Relationship between HIV/ AIDS.	1. Teacher explains the meaning and origin of HIV/ AIDS. 2. Learners express the misconception	Posters Charts Text books.	Explain the meaning and origin of HIV/ AIDS

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HIV/AIDS Transmission:	relationship between HIV/AIDS.		they have on HIV/AIDS. 3. Teacher explain the meaning and origin of HIV/AIDS.		
	i. State the meaning of HIV/AIDS transmission. ii. Describe the various modes of HIV/AIDS transmission. iii. Explain How HIV/AIDS is <u>not</u> transmitted. iv. Identify cultural practices that can encourage HIV/AIDS transmission. v. Mention cultural practices that can discourage transmission of HIV/AIDS.	How HIV/AIDS is transmitted a. Sexually transmitted. b. Mother to child c. Blood transfusion d. Sharing of sharp objects e.g. razor blades, syringes, needles etc. How HIV/AIDS is not transmitted. a. Handshake b. Mosquito/ insect bite. c. Sneezing. d. Coughing e. Hugging. f. Eating together. g. Sleeping together. h. Sharing clothes. i. Sharing toilet sits. j. Masturbation etc.	- Teacher explains the meaning of HIV/AIDS transmission. - Teacher describes the various ways HIV/AIDS can be transmitted. - Learners' express their knowledge of How HIV/AIDS is not spread. -Teacher corrects all misconceptions.	Penile ModelPosters.Film strips Vaginal model.	-Identify the various ways HIV/AIDS can/ cannot be Transmitted.- Exercises.
Epidemiology Of HIV/AIDS	Learners should be able explain the distribution of HIV/AIDS Globally, nationally, states and locally.	Globally –40 million 28 million of already dead. Nigeria 4 million situational analysis	Teachers should explain to the learners the distribution of HIV/AIDS.	Charts, Posters.	Learners should be made to appreciate the gravity of the HIV/AIDS PANDEMIC.
Etiology of HIV/AIDS	Learners should be able to: 1) Appreciate the long incubation period of 5-10 years for HIV to develop into AIDS after infection. -mention the major and minor signs of HIV/	-HIV can remain for a long time in ones body unnoticed. -During this period, it can be spread. -From 6 months the signs and symptoms start to manifest. <u>Minor signs-</u>	Discussion and interpretation in the indigenous language to enhance better understanding.	Posters Films Charts	Learners to mention the major and minor signs of HIV/AIDS infection and the stages of progression.

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	AIDS infection. -Explain the progression from HIV to AIDS. -Encourage voluntary HIV/AIDS testing.	Persistent fever -tiredness -fatigue -loss of appetite -chronic Diarrhea -cough etc. <i>Major Signs</i> -Thrush in mouth and throat -Night sweat -Rashes -Chronic weight loss -Swollen of lands -unexplained bleeding -tuberculoses -pneumonia -cancer -skin ulcers etc. <i>Progression from HIV TO AIDS</i> 1. Getting HIV 2- Multiplication of the virus in the body 3 -Weakened immunity 4. Opportunistic infection 5. AIDS 6. Death 7. Confirmation of HIV infection is by laboratory test done in an approved Hospital. 8- Reason for HIV- testing is to confirm because these signs can be mimicked by other diseases = there is however need for proper counseling before and after testing.			
Voluntary counseling	Learners should be able to: 1. Explain counseling 2. List the values/ importance of counseling 3. Note that counseling is voluntary and confidential (informed	- interaction between counselor and counselee on HIV/AIDS issues with a view to empowering the counselee to make informed decision and to be able to withstand the challenges associated with	Discussions Role playCase studies	Film strips/slidesPostersCharts	Voluntary acceptance of counseling and counseling friends and relations on HIV/AIDS issues

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Prevention of HIV/AIDS	consent) Learners should be able to: 1) Tell the meaning of HIV/AIDS prevention. 2) List the importance of HIV/AIDS prevention. 3) List the methods of HIV/AIDS Prevention. 4) State obstacles to HIV/AIDS prevention. 5) Overcome the obstacles affecting HIV/AIDS prevention.	HIV/testing. <i>Values of Counseling</i> 1) To clarify feelings and thinking. 2) To help individuals cope and manage the outcome of HIV testing. = HIV/AIDS prevention Means avoiding HIV/AIDS infection. <i>Importance of HIV/AIDS Prevention</i> 1) HIV/AIDS has no known cure. 2) It 100% preventable. 3) It is economical <i>Methods of Prevention</i> 1) Abstinence 2) Being faithful to a faithful partner. 3) Correct and consistent use of condoms. 4) Avoid transfusion of unscreened blood. 5) Desist from use of unsterilised sharp objects. 6) Prompt and effective treatment of STI. 7) Behaviour change communication. 8) Voluntary HIV testing a course line. <i>Obstacles to HIV/AIDS Prevention</i> 1) Unavailability, unaffordability and inaccessibility of condoms and sterilizing materials. 2) Alcohol and drug	-Demonstration of condom use. Discussion Role play Case studies	Use of models Posters Charts Films Posters Charts.	-Demonstrate Condom use- Persist unscreened blood transfusion and use of unspecialized objects.

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		4) Peer pressure 5) Religious belief 6) Personal value 7) Complacency, 8) Resistance to condom use etc. <i>Overcoming Obstacles to HIV/AIDS Prevention</i> 1) Stressing that condom use enhances sexual enjoyment because it extends the time of intercourse and relaxes the participants' nerves, as they will not think of pregnancy and infection. 2) Focusing on the advantages and disadvantages of condom use. 3) Making a choice between living and death. -Love and understanding for PLWHA. -Avoid Discrimination -Avoid Stigmatization -Counseling and educating. <i>Categories of Care</i> 1) Medical services -Treatment with Anti retroviral drugs (ARD) -Clinical management 2) Social support -Continuous counseling -Promoting good health practices -Good information -Economic support for PLWHA'S			

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		-Community based support. - Child care support. 3) Psychosocial support -Volunteers formation of support group, training of peer educators -Fund raising - Home based care.	=Demonstrate support and care. =Class discussion = Encouraging Home based care/treatment =Field trip to treatment and care centres.		Demonstration of care and support to PLWHA'S Produce an IEC materials for PLWHA'S
Advocacy	Learners should be able to:- Explain the concept of advocacy -Explain the practice of advocacy -Identify the steps in advocacy process -Describe the characteristic of a good advocate.	-Advocacy is the act/process of supporting a course or issue. <i>Purpose/ Objective</i> 1) Build support for a cause/issue. 2) Influencing others to support a cause/issue. 3) Trying to influence or change legislation that affect the call be or issue.	Songs Drama Brainstorming Discussion	Posters Charts Films/slides	
Revision	and	Evaluation.			

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