A Lesson Plan from Rights, Respect, Responsibility: A K-12 Curriculum

Fostering responsibility by respecting young people's rights to honest sexuality education.

This lesson is from the Be Real, Be Ready Curriculum created by staff at San Francisco Unified School District. More information can be found here: https://sfusdhealtheducation.org/be-real-be-ready/
We thank them for allowing us to re-print it for the CA-version.

NSES ALIGNMENT:

Students will be able to:

SH.8.CC.1 Define STDs, including HIV, and how they are and are not transmitted

SH.8.CC.3 Describe the signs, symptoms and potential impacts of STDs, including HIV

TARGET GRADE: Middle School – Lesson 6

TIME: 50 Minutes

MATERIALS NEEDED:

- Vocabulary Reference List one copy per teacher
- Projector and screen
- Computer
- HIV & AIDS: PowerPoint
- HIV & AIDS: PowerPoint Slide Notes – one copy per teacher
- Worksheet: HIV & AIDS one copy per student
- Activity Cards: Body Fluids and Body Openings Mismatch
- Worksheet: HIV/AIDS Mythbusters – one copy per student
- Teacher Key: HIV/AIDS Mythbusters – one copy per student
- Homework: HIV Hotline one copy per student

ADVANCE PREPARATION FOR LESSON:

Print enough copies of the Body Fluids and Body Openings Mismatch activity cards so that each student can have one card.

LEARNING OBJECTIVES:

By the end of this lesson, students will be able to:

- 1. Define the following terms: HIV, AIDS, and STI.
- 2. Distinguish between HIV and AIDS.
- 3. Understand the magnitude of HIV infection and the AIDS pandemic internationally, nationally, and locally.
- 4. Acknowledge that HIV infection and AIDS have an impact on a broad range of people including males and females of all ages.
- 5. Describe routes of HIV transmission.
- 6. Identify behaviors that can lead to HIV transmission.

A NOTE ABOUT LANGUAGE:

Language is really important and we've intentionally been very careful about our language throughout this curriculum. You may notice language throughout the curriculum that seems less familiar - using the pronoun "they" instead of "her" or "him," using gender neutral names in scenarios and role-plays and referring to "someone with a vulva" vs. a girl or woman. This is intended to make the curriculum inclusive of all genders and gender identities. You will need to determine for yourself how much and how often you can do this in your own school and classroom and should make adjustments accordingly.

PROCEDURE:

STEP 1: Write on the board and have students answer the following question on a scrap of paper.

What is one thing you've heard about HIV?

Ask a few students to read their answers. After a student has shared what they have heard, ask the class if that statement is true or false. Correct any misconceptions. (5 minutes)

STEP 2: Let students know that you will be reviewing information about HIV and AIDS.

Say, "Today we will be learning about HIV and AIDS. We will cover



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what body systems are impacted by the virus and disease. We will also learn about the human immune system and how it protects our bodies from bacteria and viruses."

Say, "HIV is an STI (sexually transmitted infection). It is the virus that can cause AIDS. If HIV is not kept under control, it can weaken a person's immune system making it more difficult for them to stay healthy. AIDS is the diagnosis someone would get if HIV has weakened the person's immune system so that it cannot fight off infection. Today, we have drugs and medication that help keep HIV under control so that someone who is living with HIV can live a longer, healthier life than ever before. We will learn about HIV and AIDS, the implications of HIV and AIDS, how these impact the human body, how the HIV virus is transmitted, and how transmission can be prevented."

Distribute the HIV & AIDS worksheet and have students follow along with the slides by taking notes on it.

Note to the Teacher: The PowerPoint slides contain notes to assist you in presenting this material. Please refer to the notes in the slides for more information about the topics presented. Review the PowerPoint slides through Slide 21 in preparation for the next section. (10 Minutes)

STEP 3: Review the fluids that transmit HIV: blood, semen, pre-cum, vaginal fluids, and breast milk. Say, "It is important to remember how to avoid contact with HIV: by keeping infected blood, semen, vaginal fluids, or breast milk out of your own or another person's mouth, genitals, anus, or broken skin. By avoiding the activities that put people in contact with these fluids or by taking measures to avoid contact with these fluids during those activities we can reduce the chances of HIV infections occurring."

Distribute the Body Fluids and Body Openings activity cards, one card per student. Explain that students should make a body fluid/opening pair with someone else. Explain that then, the students will examine the match they have made between body opening and fluid, and discuss whether this match could transmit HIV. Explain that when the match could lead to HIV transmission, the students should discuss how the risk of transmission could be reduced or eliminated (i.e. using barriers, knowing status, etc.) If time allows, have students make new matches and discuss each new match. Use this activity to check their understanding of HIV transmission. (10 minutes)

STEP 4: Continue reviewing the PowerPoint covering Slides 22-29. (10 Minutes)

STEP 5: Say, "There are many contradictory messages out there about HIV—what it is, how it's spread, etc. This true/false activity will help to bring out some of these messages and allow students to dispel some of the most common HIV myths."

Distribute the HIV/AIDS Mythbusters worksheets and give students a few minutes to complete.

After students complete the worksheet, go through each of the questions to discuss. Read each question out loud and ask a few students to share why they picked myth or fact. Provide correct information.

Note to the Teacher: If there is not enough time to complete this in class have students complete it for homework. (10 Minutes)



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RECOMMENDED ASSESSMENT OF LEARNING OBJECTIVES AT THE CONCLUSION OF THIS LESSON:

Completing the HIV & AIDS worksheet will assess learning objectives one and two will viewing the PowerPoint presentation will accomplish learning objective three and four. The Mismatch activity and Mythbusters worksheet will assess learning objectives five and six.

HOMEWORK:

Distribute and explain the directions for the HIV Hotline homework activity.



Vocabulary Reference List HIV & AIDS

- AIDS (Acquired Immune Deficiency Syndrome): A combination of symptoms and/ or illnesses caused by HIV. HIV weakens the immune system and can cause AIDS. When a person has AIDS, their body cannot fight off diseases. AIDS is a later stage of the HIV infection.
- 2. Epidemic: A widespread outbreak of an infectious disease.
- 3. HIV (Human Immunodeficiency Virus): An STI that attacks a person's immune system. This is the virus that causes AIDS. There are medications available to help a person with HIV live a healthier, longer life.
- **4. HIV Status:** The medical test results a person receives after being tested for HIV. If a person's HIV status is positive (+), they do have HIV. If a person's HIV status is negative (-), they do not have HIV.
- **5. Immune system:** The network of cells, tissues, and organs in the body that work together to defend the body against infection.
- **6. Pre-ejaculate (pre-cum):** The clear fluid that comes out of the penis before ejaculation to clean out the urethra.
- **7. Semen:** The fluid that comes out of the penis during ejaculation. It contains sperm and fluids from the seminal vesicle and prostate gland.
- **8. STI (Sexually Transmitted Infection):** An infection, or disease, which is passed from a person who has the infection to another person through sexual contact.
- **9. T-Cells:** A type of white blood cell that is an important part of the immune system. HIV attacks these cells, which causes damage to the immune system.
- **10. Transmission:** When an infection is passed from person to person.
- **11. Vaginal fluids:** The fluids that are naturally produced in the vagina.
- **12. Window period:** The period of time an infection needs to be in someone's body before it can be detected by a medical test. After the body has been exposed to HIV, the window period for this virus is two weeks to six months.



Worksheet: HIV & AIDS

NAME:	DATE:
DIRECTIONS:	
Follow along with the PowerPoint sl	ides to fill in the answers below.
1. What does HIV stand for?	
н	
•	
2. What does AIDS stand for?	
Α	
I	
<u> </u>	
3. What does STI stand for?	
s	
т	
	-



4. What system in the body does HIV attack?	
5. What 4 fluids can transmit HIV?	
1	
2	
3	
4	
6. Name 3 ways HIV can be transmitted:	
1	
2	
2	



HIV Transmission & Body Fluid Activity Cards



Eye

Ear

Vagina

Nose

Anus

Mouth





Fluids

Vaginal Semen or Pre-Cum

Blood

Tears

Breast Milk

Sweat



Worksheet: HIV/AIDS Mythbusters

NAME	:: DATE:
DIRECTION For each	ONS: statement, write in the blank space whether you think the statement is a myth or a fact.
i oi cacii	statement, which in the blank space whether you think the statement is a myth of a fact.
	_ 1. Someone can get HIV from sharing swimming pools & hot tubs with people living with HIV.
	_ 2. Someone is very likely to get HIV from having a blood transfusion.
	_ 3. Someone can get HIV from having oral sex.
	_ 4. You can tell if someone has HIV or AIDS just by their appearance.
	_ 5. If someone gets HIV, they will most likely die very soon from the infection.
	_ 6. Only gay people get HIV.
	_ 7. It is not possible to get HIV from insects that have bitten an infected person.
	_ 8. The "window period" for HIV detection can be from 2 weeks to 6 months.
	9. HIV can be transmitted through sweat, tears, and spit.
	_ 10. There is a cure for HIV.

Advocates for Youth
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What other myths have you heard of about HIV or AIDS?

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Teacher Key: HIV/AIDS Mythbusters

Myth 1. Someone can get HIV from sharing swimming pools & hot tubs with people living with HIV.

If there was blood, semen, vaginal fluids or breast milk in a pool or hot tub the chemical used in swimming pools and hot tubs would instantly kill the virus HIV. However, some people think that this means they don't need to use a condom if they are having sex in a pool or hot tub, which is not true. If sexual fluids meet inside the body (either vaginal or anal sex), they can transmit HIV, even in water.

- Myth

 2. Someone is very likely to get HIV from having a blood transfusion.

 It is highly unlikely. In the US, all donated blood has been tested for HIV since 1985.

 Today the American blood supply is extremely safe. Donors are asked if they have practiced behaviors that place them at increased risk for HIV. If they have, they are not allowed to donate blood.
- Fact 3. Someone can get HIV from having oral sex.

Yes, it is possible for someone to become infected with HIV through oral sex. The exact degree of risk of transmitting HIV during oral sex is not clearly known. It is known that someone is less likely to contract (get) HIV from oral sex than from vaginal or anal sex. The risk of getting HIV during oral sex increases when there is a cut or opening of any kind inside the mouth. Cells in the mucous lining of the mouth may carry HIV into the lymph nodes or the bloodstream. Someone can get HIV by having oral sex on a vagina or a penis, which is why it is safer to use a latex barrier during oral sex (condom or dental dam). Keep in mind, it is possible to get other STIs through unprotected oral sex as well.

- Myth

 4. You can tell if someone has HIV or AIDS just by their appearance.

 Most people don't show any external symptoms for about the first 8-10 years of having the virus. And even then, it is nearly impossible to tell whether someone has AIDS just by looking at them.
- Myth 5. If someone gets HIV, they will most likely die very soon from the infection. People are living with HIV longer today than ever before. Medications, treatment programs, and a better understanding of HIV allows people living with HIV to live longer and healthier lives.
- Myth
 6. Only gay people get HIV.

 Anyone can be susceptible to HIV/AIDS, regardless of their sexual orientation.

 Anyone who engages in behaviors that could transmit HIV is at risk. In fact, worldwide, HIV is spread most often through heterosexual (male-female) contact.
- 7. It is not possible to get HIV from insects that have bitten an infected person.

 Mosquitoes, flies, ticks, fleas, bees or wasps do not transmit HIV. If a bloodsucking insect bites someone with HIV, the virus dies almost instantly in the insect's stomach as it digests the blood. HIV can live only in human cells.

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Fact 8. The "window period" for HIV detection can be from 2 weeks to 6 months.

The window period is the amount of time it takes for HIV to be detectable after someone has become infected. This can last from 2 weeks to 6 months after exposure, so it is important to know that getting tested right after a possible exposure (such as having unprotected sex or sharing needles) will not necessarily show whether someone has contracted HIV. If someone is concerned about a specific incident, they would need to go back and get tested 6 months after the incident and be sure to use protection in the meantime, so they don't unintentionally transmit it to someone else.

Myth 9. HIV can be transmitted through sweat, tears, and spit.

None of these fluids can transmit HIV. Casual contact with someone who is living with HIV does not pose any risk of HIV transmission.

Myth 10. There is a cure for HIV.

As of right now, there is no cure for HIV, but there are medical advancements that are bringing us closer to vaccines, medical prevention measures, and a cure. There are many medications and treatment available to manage someone's HIV infection – but these are not cures.

Teacher's Note: Here is more information if students ask about recent stories in the news of people being cured of HIV.

+ Timothy Brown, also known as "the Berlin Patient," was cured of HIV when he received a bone-marrow transplant from a donor who was genetically resistant to HIV. Brown, who was HIV-positive and had leukemia, received an experimental bone-marrow transplant to treat both conditions in 2009. The outcome was that there was no longer HIV in his body. While his story is an example of medical advancement toward a cure for HIV, this type of treatment is not a viable solution or cure for most people. Bone-marrow transplants are expensive, only a fraction of people have the gene mutation that makes them resistant to HIV, and only a fraction of those people are bone-marrow donors.



Homework: HIV Hotline

DIRECTIONS:

Imagine you work on an HIV Hotline. Pick and answer three of the questions below from your callers. Circle the numbers of the callers you are answering. You may ask the person more questions if you need to. Write what you would ask them and your answer to their questions on the back of this page.

Caller #1: Female, age 19

"I just found out my girlfriend of three years has been sleeping with a guy. We don't use dental dams because we were only supposed to have sex with each other. Do I need an HIV test? What should I do?"

Caller #2: Male, age 18

"I am straight, but sometimes my guy friends and I, you know, play around. I have had anal sex with a few other guys and sometimes we use condoms, but sometimes we don't. Do I need an HIV test? What should I do?"

Caller #3: Female, age 17

"I've been going out with a man who's a lot older than me. We haven't gone all the way yet, but we have done a lot of touching and a little...um, oral sex. I just found out that he shoots drugs. Do I need an HIV test? What should I do?"

Caller #4: Male, age 18

"My girlfriend and I have an open relationship, and we always use condoms with other people. She finally told me a condom broke with this other guy a week ago, but we've already had unprotected sex. Do I need an HIV test? What should I do?"

Caller #5: Male, age 17

"My boyfriend and I have been together for 9 months. We have only been with each other and we do not have sex with other people. I just learned that oral and anal sex can transmit HIV. Do I need an HIV test? What should I do?"



HIV & AIDS Slide Notes

	SLIDE 1
HIV & AIDS	
Do Now What is one thing you have heard about HIV?	SLIDE 2
• Human • Immunodeficiency • Virus	SLIDE 3 Ask students what they think HIV stands for. Click to reveal the answers. ☐ Human = this is a disease in human beings, not in other animals ☐Immunodeficiency • What system is affected by this disease? The immune system • What is the function of the immune system? To prevent infections by bacteria and viruses • What does "deficiency" mean? Not enough of something • What does "immune deficiency" mean? The immune system is not strong enough to combat other infections ☐ Virus = this is a microscopic living thing which causes infections Sum it up: HIV is a virus that attacks the immune system in humans, and makes the immune system weaker so it is more difficult to stay healthy and fight off other infections.



• Acquired • Immune • Deficiency • Syndrome	Ask students what they think AIDS stands for. Click to reveal the answers. Acquired = from someplace else, not from inside Immune = able to fight off infection Deficiency = not enough of something Syndrome = a combination of signs and symptoms characteristic of a particular disease AIDS is: Another way of saying that someone's immune system is very weak or that they are quite sick as a result of HIV infection. A combination of symptoms and/or specific illnesses caused by the inability of the immune system to fight off infections (which is caused by HIV). AIDS often occurs as a later stage of HIV infection, often occurring eight or more years after a person is infected with HIV. Depending on when someone is diagnosed, the medications they are on, and other factors, AIDS may not develop for quite a few years. Because AIDS is a syndrome, not an infection, people cannot transmit AIDS to each other. HIV is the virus that someone could get
HIV vs. AIDS? HIV is a preventable viral STI. HIV is the virus that can cause AIDS if left untreated. HIV can be transmitted from one person to another through specific activities. AIDS cannot be transmitted and can be prevented.	or give to another person. Over time, the virus can diminish or weaken the immune system and the person can develop AIDS. SLIDE 5 Review the important points about HIV and AIDS. Suggested Script: HIV is an STI. It is the virus that can cause AIDS. If HIV is not kept under control with medication, it can weaken a person's immune system making it more difficult for them to stay healthy. AIDS is the diagnosis someone would get if HIV has weakened the person's immune system so that it cannot fight off infection. Today, we have drugs and medication that help keep HIV under control so that someone who is HIV-positive (has HIV) can live a longer, healthier life than ever before.



Let students know that, compared to other infections, HIV has not been around for that long. Ask students: when did the US first report seeing patients with AIDS? The first reported case of AIDS in the US was in 1981.

About 30 years later 34 million people are now living with HIV. While HIV is still a serious virus, it has become a disease many people can live with, and there are many people in the world who have it. However, the ability to live a heathy life with HIV varies defending on the person, where they live, the healthcare they have access to, and more.

NOTE:

Origin of HIV: No one knows the exact origins of HIV but it is thought that it crossed over from Chimpanzees to Humans, somewhere in West Africa. One theory is that a hunter got cut while butchering a dead chimpanzee and the animal's blood got into the human's body where the virus was then able to adapt to a human host. (If students are especially interested in this topic, you can refer them to a Radiolab podcast discussing the origins of HIV. It is available for free download at http://www.radiolab.org/2011/nov/14/)

HIV and Gay Community: Some people think HIV only affects people who are gay. This is incorrect – HIV affects all people – no matter their sex, gender, or sexual orientation. Some people think that HIV only affects gay people because HIV was first identified in the US primarily in gay communities in LA, SF, and NYC.

Which countries have the most people living with HIV?



SLIDE 7

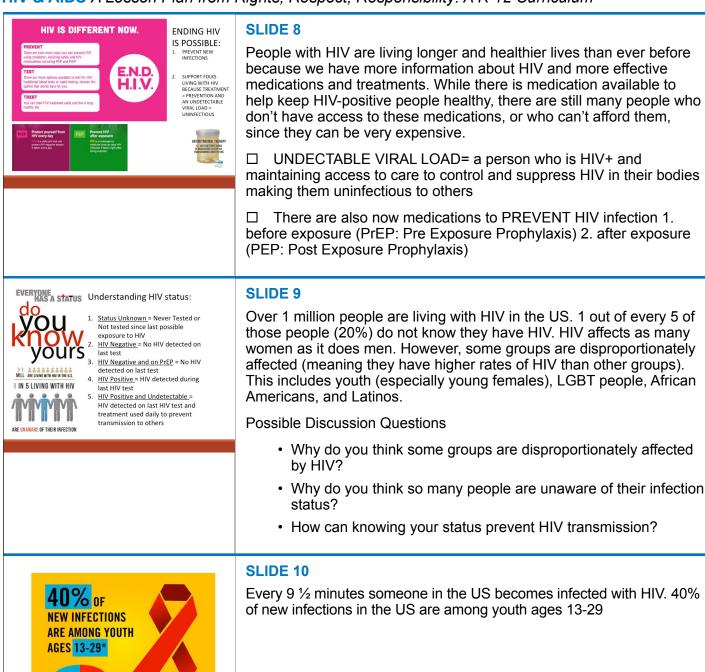
HIV affects people all over the world.

- ☐ Which countries have the highest number of people living with HIV? South Africa, Nigeria, India, Ethiopia, Kenya, Mozambique, Tanzania, Uganda, Zimbabwe, and the United States of America
- ☐ How does the US compare with other regions of the world in terms of the numbers of people living with HIV? The US has a fairly high number of people living with HIV compared to other countries in North America and Europe.

Possible Discussion Questions

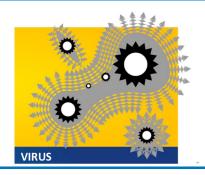
- ☐ Why do you think there are different rates of HIV around the world?
- ☐ What do you think might affect the rates of HIV?

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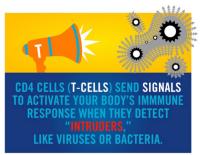
Let students know that you will now review how HIV affects the body.



SLIDE 12

HIV enters the body. (Later, we will talk more about the ways in which that can happen.)

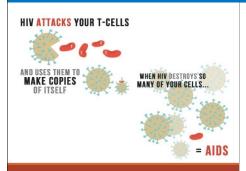
HIV takes over cells in the body and starts to reproduce. The cells that HIV hijacks are called T-cells, which are an important part of the body's immune system.



SLIDE 13

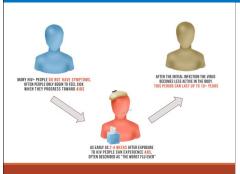
The body reacts by producing antibodies which try to fight HIV. The antibodies may cause the body to run a fever or experience flu-like symptoms during the first few days of HIV infection. The symptoms will go away, but the HIV is still in the body.

HIV destroys the T-cells that it takes over and prevents them from protecting the body from other diseases. This means that someone who has HIV will have fewer and fewer T-cells over time if they have no treatment.



SLIDE 14

A person with a healthy body has about 600-1000 T-cells per mm3 of blood. A person will be considered to have AIDS if their T-cell count is 200 or below.



SLIDE 15

Symptoms of HIV may not appear for years. However, a person can spread the virus to others whether or not they have symptoms. Symptomatic HIV may include diarrhea, headaches, weight loss, night sweats, fever, tiredness, and swollen lymph glands.

After a number of years without any treatment, AIDS-defining illnesses and infections may begin to occur. These illnesses can include various cancers and infections. These illnesses are often called 'opportunistic infections' because they take advantage of a person's weakened immune system.



Transmission

HOW HIV CAN GET FROM ONE BODY INTO ANOTHER



FLUIDS OF TRANSMISSION:

- BLOOD
- SEMEN (CUM)
- PRE-EJACULATE (PRE-CUM)
- VAGINAL & RECTAL FLUIDS
- BREASTMILK

SLIDE 17

HIV can only be transmitted through these bodily fluids:

- Blood
- · Semen (cum)
- Pre-seminal fluid (pre-cum/pre-ejaculate)
- Vaginal fluids
- · Breast milk

HIV cannot be transmitted through sweat, tears, spit, or urine.



HIV CAN ENTER THE BODY THROUGH:

- · LINING OF THE ANUS OR RECTUM
- LINING OF THE VAGINA AND/OR CERVIX
- OPENING TO THE PENIS
- MOUTH THAT HAS SORES OR BLEEDING GUMS
- CUTS OR SORES

SLIDE 18

HIV can be transmitted when one of these fluids from someone who is living with HIV enters the body of another person. This can happen through their:

- · Anus or rectum
- Vagina and/or cervix
- Opening of the penis (urethral opening)
- · Mouth with cuts or sores
- · Cuts or sores on the skin

HIV can be spread through:









SLIDE 19

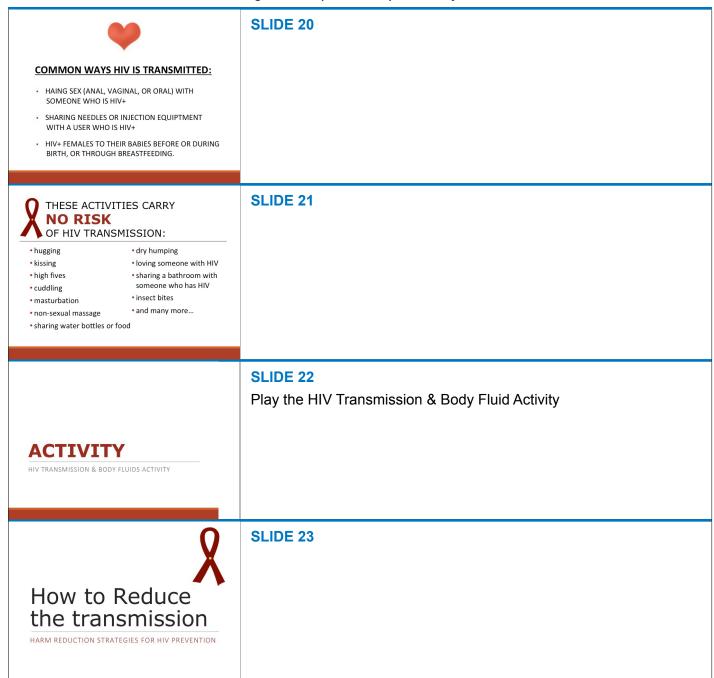
☐ HIV can be transmitted through sexual contact, injection drug use, from mother to child through childbirth and breastfeeding, and through occupational exposure (such as a health care provider getting an accidental needle stick). HIV is now rarely transmitted through blood or organ transplant. In the US, the risk of contracting HIV through blood or organ transplant is extremely low since the blood supply here is regularly tested for HIV.

☐ The most common ways that HIV is transmitted are through vaginal and anal sex, and sharing needles or injection equipment. In the US, pregnant mothers are screened for HIV and treated with medicine to reduce the risk of transmission to the baby during delivery and through breastfeeding.

☐ It is possible to transmit HIV through contaminated equipment used for piercings and tattoos. It is recommended to use single-use supplies for tattoos and piercings and avoid sharing needles and equipment.

☐ Someone CANNOT get HIV through kissing, non-sexual massage, masturbation, or 'dry humping' (rubbing against each other with clothes on).

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Ways to Reduce the Risk of HIV



- Use barrier methods
- Know the status of sex partner(s)
- · Avoid sharing needles
- PrEP
- PEP

SLIDE 24

There are many ways to reduce the risk of HIV transmission. Here are a few

- **Using barrier methods** Barrier methods prevent the sharing of bodily fluids. Preventing fluid contact can be done by using barrier methods such as condoms, internal condoms, dental dams, latex or nitrile gloves, or Saran/plastic wrap.
- Knowing the status of sex partner(s) Before engaging in sexual activities, someone can ask their partner what their HIV status is. Remember, that 20% of people who are living with HIV, do not know that they have the virus. It is recommended that anyone who is sexually active or engaging in behaviors that could transmit HIV (including vaginal, anal, and oral sex, or sharing needles) get tested for HIV every 3-6 months to know what their status is.
- Avoid sharing needles Blood can be shared if needles are shared for tattoos, piercings, or injection drug use. Always use "clean" needles. If you or someone you know is using injection drugs, please speak to a parent, guardian or trusted adult. The staff at the wellness center can help.
- PrEP Pre-exposure prophylaxis, or PrEP, is a way for people who do not have HIV but who are at substantial risk of getting it to prevent HIV infection by taking a pill (brand name Truvada) every day. When someone is exposed to HIV through sex or injection drug use, these medicines can work to keep the virus from establishing a permanent infection. When taken consistently, PrEP has been shown to reduce the risk of HIV infection in people who are at high risk by up to 92%. PrEP is much less effective if it is not taken consistently. PrEP is a powerful HIV prevention tool and can be combined with condoms and other prevention methods to provide even greater protection than when used alone. But people who use PrEP must commit to taking the drug every day and seeing their health care provider for follow-up every 3 months.

What is PrEP?

- Short for "pre-exposure prophylaxis"
- HIV prevention strategy in which HIVnegative people at risk take an oral pill once a day before coming into contact with HIV to reduce their risk of HIV infection
- Can be taken by anyone, regardless of gender identity or sexual orientation, including some youth under 18
- Most people can get it at little to no cost

SLIDE 25

Make sure all students understand what PrEP is and let them know that they can find out more at PleasePrepMe.org

What is PEP?

- Short for "post-exposure prophylaxis"
- HIV prevention option for someone who thinks they've been recently exposed to HIV
- Medicine must be started within 72 hours after exposure

SLIDE 26

www.cdc.gov is another great resource for PrEP and PEP information









Practice Universal Precautions





Practice Universal Precautions – In school or other public places, if there is exposed blood, use a barrier between it and your skin like a rubber glove. Avoid touching someone else's blood directly.

Ways to Reduce the Risk of HIV



TESTING OPTIONS:

/ MOUTH SWAB

URINE

GET TESTED



SLIDE 28

Get tested – An HIV test requires a finger stick, drawing blood, or an oral swab. Local teen clinics offer free HIV testing. Usually, someone can get the results by the end of the visit.

the window period

It can take...

2 weeks to 6 months

for a test to detect HIV after a person has been exposed to the virus.

SLIDE 29

Window period – HIV tests are not looking for the HIV, the virus that causes AIDS, they are looking for the body's response to the virus – antibodies. Since it can take a while for the body to make these antibodies, HIV tests will not be accurate immediately after exposure to HIV. There is a window period. The window period is 2 weeks to 6 months after exposure for an HIV test to accurately determine if someone has been exposed to HIV or not.

the window period

If a person had unprotected sex on January 1st, (& may have been exposed to HIV) when is the earliest an HIV test could detect HIV?

About 2 weeks later: January 15th

When would someone be sure that the HIV test accurately showed if they were exposed to HIV or not on January 1st?

About 6 months after exposure: July 1st

*Remember: if someone has other possible exposures between January 1st and July 1st, they will need to retest.

SLIDE 30

- ☐ If someone had unprotected sex on January 1st when is the earliest that an HIV test could detect HIV antibodies? Two weeks later January 15th
- ☐ When would this person be sure that a negative test result is completely accurate if they were exposed to HIV on January 1st? About 6 months later July 1st.
- $\hfill\square$ Remind students that if someone has another potential exposure in between the tests, then that person will need to re-test.

