LESSON PLANS
FOR HIV, AIDS AND SAFER SEX

Getting Started
Transmission
SEX & HIV
Attitudes
Facts

AVERT
Contact Details:

AVERT

www.avert.org

4 Brighton Road
Horsham,
West Sussex
RH13 5BA
England

Email – info@avert.org

This is a new resource developed by AVERT. Many other resources and information can be found on our website - www.avert.org

Authors / Source: This document is an adaptation by Simon Forrest, Annabel Kanabus and Steve Berry of material originally published in ‘AIDS: Working With You People’ by Peter Aggleton, Kim Rivers and Ian Warwick (ISBN 0-9515-351-8-8) together with some new material.

Copyright:

The material in this package may be reproduced and used for personal and non-profit making educational purposes, provided that the original source is credited. If you wish to reproduce the material for commercial or other purposes, please contact Avert.

AVERT is a registered charity, number 1074849
<table>
<thead>
<tr>
<th><strong>Contents</strong></th>
<th><strong>Page number</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>4</td>
</tr>
<tr>
<td>Getting Started</td>
<td>5 - 7</td>
</tr>
<tr>
<td>Choosing Activities</td>
<td>8</td>
</tr>
<tr>
<td><strong>Section 1 – Facts</strong></td>
<td></td>
</tr>
<tr>
<td>3 Statements about AIDS</td>
<td>9</td>
</tr>
<tr>
<td>The AIDS Quiz</td>
<td>10 - 12</td>
</tr>
<tr>
<td>Condom Leaflet</td>
<td>13</td>
</tr>
<tr>
<td><strong>Section 2 – Transmission</strong></td>
<td></td>
</tr>
<tr>
<td>Transmission Runaround</td>
<td>14 - 17</td>
</tr>
<tr>
<td>Transmission Bingo</td>
<td>18 - 20</td>
</tr>
<tr>
<td><strong>Section 3 – Attitudes</strong></td>
<td></td>
</tr>
<tr>
<td>Ten Differences</td>
<td>21 - 22</td>
</tr>
<tr>
<td>Talking About Prejudice</td>
<td>23 - 24</td>
</tr>
<tr>
<td><strong>Section 4 Sex and HIV</strong></td>
<td></td>
</tr>
<tr>
<td>Talking About Sex</td>
<td>25</td>
</tr>
<tr>
<td>Negotiating Sex</td>
<td>26 - 27</td>
</tr>
<tr>
<td><strong>Monitoring and Evaluation</strong></td>
<td>28</td>
</tr>
<tr>
<td><strong>Follow-up Activities</strong></td>
<td>29</td>
</tr>
</tbody>
</table>
Introduction

What this pack contains

This pack contains information about AIDS, HIV and safer sex education for use with young learners, lesson plans for different types of lesson, and photocopiable resources.

A number of activities are described here which can be used to educate young people about HIV infection and AIDS. The activities are interactive and are designed for use with groups of young people. They aim to be effective by involving the young people in their learning and they are suitable for use with a wide range of age groups. They may be adapted slightly for younger and older groups.

Included here are lessons to teach the facts about HIV and AIDS. But just knowing the facts is not enough. Young people need to be able to talk and ask questions about HIV and AIDS, and they need opportunities to explore and re-evaluate their beliefs and feelings.

Young people are especially vulnerable to HIV and other sexually transmitted diseases (STDs) from both risky sexual behaviour and drug use. Even if they are not engaging in risk behaviours today, they may soon be exposed to situations that put them in danger. There is no set age at which young people should receive this education, but they need to know how to protect themselves before they find themselves in risky situations.
Getting started

HIV/AIDS is a potentially sensitive subject and discussion about it can provoke strong views as well as highlighting the need for additional information. People working with young people need to be aware of the legal and cultural context in which they operate and whether this will affect what they can teach.

- Be clear about your own attitudes and values. Do you believe that AIDS education is important for young people? Will your feelings affect what you choose to teach and the way that you teach it? Do you find the subject embarrassing?

- Is your knowledge good enough? You may have learners asking you questions. Do you know enough to be able to answer them? Or are you going to allow time for learners to research and find their own answers? There is lots of information on our website (www.avert.org)

- Are there relevant institutional, local or national policies and laws? Do they offer guidance and affect teaching around HIV/AIDS? Does your curriculum place any restrictions or obligations on you?

- Check out what support or expertise there is within your institution or area. Are there other services in the area which you can recommend to learners?

- Reflect on the local culture and community attitudes towards HIV/AIDS and how that will affect what you aim to achieve and do.

It's good to talk

One of the most important things is to try and create an atmosphere where young people feel listened to, cared for and respected. When they do talk about AIDS, you can listen to what they have to say, acknowledge their fears, reassure them, answer their questions and sort out any confusions. You can also intervene if you hear young people repeating inaccurate or prejudiced information. The role of a teacher is not only to provide information, but also to create an atmosphere that facilitates learning.

For example, if AIDS is used as a term of abuse then you could intervene. If nothing is said or done, they will think that you agree or approve. Challenging discrimination and prejudice helps to counteract some of the things young people may hear or read elsewhere.

Talking to young people may involve discussing things you don't normally talk about. But young people who grow up to be able to talk about sex without feeling too embarrassed, may have a better chance of having safer sexual relationships in the future.
Thinking things through

You will feel more comfortable talking to a young person if you have thought about some of the questions which may arise in discussion, for example "How do people get AIDS?" and "What is a condom?".

Young people pick up on how we feel about things from the way we behave. It is important to be clear about your own beliefs and attitudes on things like:

- sex
- illness
- drugs
- death

It is also important to be clear about the facts. Do you know enough to be able to answer questions? There is a lot of information on this website (www.avert.org).

Answering Young people's questions
When a young person does ask you a question, try to

- listen carefully
- take seriously what they say
- answer at their level and
- be as honest as possible.

Starting groupwork

Effective teaching and learning involves open discussion, interaction between teachers and learners, and critical evaluation of points of view as well as the acquisition of new knowledge. In order to engage with groups in this kind of learning and on a potentially sensitive subject like HIV/AIDS, you need to think about how to make the group a safe place for you and young people to talk and interact together. You can think about the following:

- Advantages and disadvantages of working in single-gender and mixed-gender groups;

- Agreeing ground rules with a group on confidentiality, behaviour, challenging and disagreeing with others, asking personal questions and so on;

- Check out what institutional, local or national policies and laws offer guidance and affect teaching around HIV/AIDS;

- Deciding if young people will be able to opt-out of activities if they want to;
Tips for inexperienced teachers

Groupwork: Organising groups can be easier if you know the group. Some teachers prefer to group able learners with less able or less confident ones. Others prefer single-ability groups. If you just ask “form yourselves into groups”, then the learners will sit with their friends, which has the advantage of making them feel comfortable speaking in their groups, but the disadvantage that some groups may not focus on the subject matter.

Asking Questions: Learners feel better about answering questions in class if they feel confident that they know the answers. It is often good to give them time to confer in their groups. Asking a group “what’s the answer?” (or some similar question) will often result in no response. “Discuss the question for 2 minutes” followed by “what’s the answer?” is more likely to get a response.

Time Limits: Many lessons have limited time, so it’s good to use it constructively. When you start an exercise, give a time limit. “Discuss the answers” will not provoke as dynamic a response as “Discuss the answers. You have 2 minutes.”

Whiteboard: A good alternative to writing answers on a white (or black) board can be to give out pens to the students, and let them stand up and write up their own answers.
Choosing activities

This package includes four basic types of activity:

- **Facts** – Learning the facts about HIV and AIDS
- **Transmission** – Learning about HIV transmission
- **Attitudes** – Considering attitudes to HIV and AIDS
- **Sex & AIDS** – Focusing on sex and HIV

The greatest benefit will be obtained by combining activities in a short programme over a number of lessons. How you combine activities will depend on your experience and your group, as well as on the time available, and how you want to fit the lesson into the curriculum.

A basic programme with only limited time might consist of:

- **Lesson 1** The AIDS Quiz (Section 1, Facts)
- **Lesson 2** Transmission Runaround Activity (Section 2, Transmission)
- **Lesson 3** Ten Differences Activity (Section 3, Attitudes)

A slightly more comprehensive programme might consist of:

- **Lesson 1** Three Statements about AIDS Activity (Section 1, Facts)
- **Lesson 2** Ten Differences Activity (Section 3, Attitudes)
- **Lesson 3** Talking About Sex Activity (Section 4, Sex)
- **Lesson 4** Transmission Runaround Activity or Transmission Bingo Game (Section 2, Transmission)

Finally, a very comprehensive programme might consist of:

- **Lesson 1** The AIDS Quiz (Section 1, Facts)
- **Lesson 2** Talking About Prejudice Activity (Section 3, Attitudes)
- **Lesson 3** Transmission Runaround Activity or Transmission Bingo Game (Section 2, Transmission)
- **Lesson 4** Condom Leaflet Activity (Section 1, Facts)
- **Lesson 5** Negotiating Sex Activity (Section 4, Sex)
Section 1 - Facts

Facts about HIV and AIDS
This page describes two activities, Three Statements about AIDS, and the AIDS Quiz. Both of these focus on the facts about HIV and AIDS.

Three statements about AIDS

Aims
To distinguish between facts and misinformation about HIV and AIDS.

What you will need
Chairs in a circle or two groupings. Small pieces of paper, pens. Large sheets of paper. Time about 30-45 minutes depending on the size of the group.

What you do
1. Hand out 3 small pieces of paper to each group member and ask them to write on each one some statement they have heard about HIV or AIDS (this need not be something they agree with).
2. Collect in the small pieces of paper and deal them out at random.
3. Divide the group members into two roughly equal groups.
4. Distribute a large sheet of paper to each group with headings 'AGREE', 'DISAGREE' and 'DON'T KNOW' on it. Ask group members to sort their small pieces of paper into each of these columns, reaching agreement on where each statement should be placed.
5. When they have done this (about 20 minutes probably), both groups should be asked to justify their decisions to the main group as a whole. So group members must be prepared to say why they made the choices they did.
6. Facilitate a discussion of the scientific, medical and social issues raised by the statements and where they are placed.

Likely outcomes
By having to defend the decisions made, the group will have a chance to begin to distinguish facts from prejudice and misinformation. Your own interventions will help consolidate understanding.
The AIDS Quiz

1. **Does HIV only affect gay people?**
   - Yes
   - No
   - Only gay men
   - Only gay women

2. **Approx. how many people are infected with HIV worldwide?**
   - 3.5 million
   - 25 million
   - 40 million

3. **How can you tell if somebody has HIV or AIDS?**
   - Because of the way they act
   - They look tired and ill
   - You cannot tell

4. **Can you get AIDS from sharing the cup of an infected person?**
   - No
   - Yes
   - Only if you don’t wash the cup.

5. **Which protects you most against HIV infection?**
   - Contraceptive Pills
   - Condoms
   - Spermicidal Jelly

6. **What are the specific symptoms of AIDS?**
   - A rash from head to toe
   - You start to look very tired
   - There are no specific symptoms of AIDS

7. **HIV is a...**
   - Virus
   - Bacteria
   - Fungus
8. Can insects transmit HIV?
   - Yes
   - No
   - Only mosquitoes

9. Is there a cure for AIDS?
   - Yes
   - Drinking hot coffee in a cold bath
   - No

10. When is World AIDS Day held?
    - 1st January
    - 1st June
    - 1st December

11. Is there a difference between HIV and AIDS?
    - Yes
    - No
    - Not very much

12. What percentage of those infected with HIV are women?
    - 19%
    - 46%
    - 74%

13. Worldwide, what is the age range most infected with HIV?
    - 0-14 years old
    - 15-24 years old
    - 25-34 years old

14. Is it possible to prevent a woman infected with HIV from having an infected baby?
    - Yes
    - No
    - Only if she takes a special drug

15. How many sizes do condoms come in?
    - One
    - Regular and large
    - Many different sizes
Quiz Answer Sheet

1. No  
2. 40 million  
3. You cannot tell  
4. No  
5. Condoms  
6. There are no specific symptoms of AIDS  
7. Virus  
8. No  
9. No  
10. 1st December  
11. Yes  
12. 46%  
13. 15-24 years old  
14. Only if she takes a special drug  
15. Many different sizes

The statistics in this quiz are accurate at the time of publishing, 2003.

For up to date statistics please consult www.avert.org
Condom Leaflet

Aims: To consolidate awareness about the correct use of condoms.

What you will need

- Chairs in a circle
- A packet of condoms
- Something to demonstrate putting the condom on, such as a vegetable
- Paper and pens.

If you have not demonstrated condom use before then it can be helpful to practice beforehand.

Time

Up to 60 minutes, depending on the size of the group.

What you do

1. Explain that participants will be producing leaflets or posters on how to use a condom correctly. You are going to show them and they are going to take notes.

2. Hand out paper and pens.

3. Demonstrate condom use on the vegetable or whatever else you have.

4. Ask each participant, or small groups of 3 or 4, to design a poster or leaflet showing people of their age how to use a condom.

5. Discuss the finished products and pin them up.

Likely Outcomes

Some of the techniques associated with condom use will be clarified, and a series of resources will have been produced which can be used with other groups, or left to provoke discussion and debate.
Section 2 - Transmission of HIV

This section describes two activities, Transmission Runaround and Transmission Bingo, which help group members to learn about the transmission of HIV.

Transmission Runaround

Aims

To assess levels of awareness of how HIV is transmitted. To encourage group members to think about a variety of transmission routes.

What you will need

- A reasonably spacious room, to allow for free movement.
- A copy of Transmission Runaround 'True/False Sheet' for yourself and the answer sheet.
- Two large sheets of paper clearly marked 'STRONGLY AGREE' and 'STRONGLY DISAGREE'. Pins.

Time

Up to 60 minutes depending on the number of statements used and the size of the group.

What you do

1. Put up the 'STRONGLY AGREE' and 'STRONGLY DISAGREE' sheets on the wall at opposite ends of the room.

2. Explain to the group as a whole that you will read out a series of statements, one at a time. Each person is to think about whether they agree or disagree with it, and move to the appropriate side of the room. It is all right to stay in the middle if they are uncertain.

3. Read the first statement. Once everyone has moved to their chosen place, ask members to choose one person near them and discuss why they are standing where they are.

4. Now ask people to choose one person standing as far away from them as possible, and to discuss the statement with them, explaining why each has chosen to be where they are.

5. Repeat the procedure with as many statements as time allows.

6. Re-assemble as a group and, going round the group, ask each individual to identify one piece of information they are confused or unclear about. Ask members of the group to clarify the issues involved and intervene yourself where necessary.
Likely outcomes

At the end of the exercise, it will be clear what areas of uncertainty remain. Individuals will have had a chance to think about ways of transmitting HIV, and to discuss these with other group members. It will also be clear that transmission routes for HIV are very specific e.g. it is not 'sex' that transmits the virus, but unprotected sex involving penetration. People can sometimes become quarrelsome during this exercise so you may need to intervene to settle disputes.
True/False Question Sheet

1. You can become infected with HIV by sleeping around.
2. Injecting drugs can give you HIV.
3. You can get HIV from toilet seats.
4. If you are fit and healthy you won't become infected with HIV.
5. Married people don't become infected with HIV.
6. If you stick with one partner you won't become infected with HIV.
7. Women are safe from HIV as long as they use a contraceptive.
8. You can become infected with HIV from sharing toothbrushes.
9. If you have sex with people who look healthy, you won't become infected with HIV.
10. If you only have sex with people you know, you won't become infected with HIV.
11. Anal sex between two men is more risky than anal sex between a man and a woman.
12. You can become infected with HIV from kissing.
13. A man can become infected with HIV if he has oral sex with a woman.
14. A woman can become infected with HIV if she has oral sex with a man.
15. Condoms can stop you becoming infected with HIV.
16. A woman can become infected with HIV more easily during her period.
True/False Answer Sheet

1. True. Sleeping around is not in itself risky, but having unprotected sex with an infected person is. By using condoms properly and by avoiding sex with penetration, you can substantially reduce the risk of infection.

2. True. Only if the needle or syringe previously has been contaminated with HIV.

3. False. There are no known cases of HIV infection via toilet seats.

4. False. It does not matter how healthy or unhealthy you are, if you engage in risky activities you stand a chance of being infected.

5. False. This depends on the partners involved, what they did before they met, whether either has unprotected sex outside of the marriage or injects drugs using contaminated equipment. Marriage by itself offers no guarantees of safety.

6. False. As for No 5.

7. False. Only condoms offer women protection against HIV, and even condoms cannot offer complete safety. Other forms of contraception do not offer protection from HIV. They can also be infected in other ways, such as sharing contaminated needles.

8. False. There is no evidence of transmission via this route, but it is sensible not to share toothbrushes for general health reasons.

9. False. Most people with HIV will look perfectly healthy. Looks are therefore a useless way of assessing risk.

10. False. Knowing someone well offers no reliable guide to whether or not they have HIV infection.

11. False. Anal sex is equally risky regardless of whether it takes place between two men or a man and a woman.

12. False. There is no evidence of transmission in this way, although kissing when there are sores or cuts in the mouth may pose some risk.

13. True. HIV is present in cervical and vaginal secretions as well as in (menstrual) blood, so there is the possibility of transmission this way.

14. True. HIV is present in semen so there is a possibility of transmission in this way.

15. True. Condoms used properly will help to prevent transmission of HIV from an infected partner to an uninfected partner. Condoms are not 100% safe though. Use a lubricant which is water based, as oil based lubricants can weaken the condom. When buying condoms check the ‘sell by’ date.

16. True. It is possible that a woman, and her partner, may be more at risk during her period. Using a condom properly will reduce the risk.
Transmission Bingo Game

Purpose: To design and play a game to help learners see how HIV cannot be spread, and that it cannot be transmitted by casual contact.

Preparation:

- Whiteboard and markers
- Paper, pencils, Scissors
- Bingo sheet master
- In advance, duplicate a Bingo sheet for each participant

Procedure:

Begin by brainstorming ways that HIV cannot be spread from one person to another. Put the learners into small groups and give them about 3 minutes to think of as many ways as they can that AIDS cannot be transmitted. When they have done this, either write a list on a white board or better, give a board-pen to each group, and let them write their ideas on the white board.

When this is done, go through the list with the group checking that their answers are clear. If necessary you can supplement the young people’s ideas with the suggestions below.

- Hugging
- Holding hands
- Swimming
- Sharing a glass
- Riding in a car
- Sharing a classroom
- Mosquitoes
- Toilet seats
- Eating in a restaurant
- Using a public telephone
- Using the same towel
- Dancing with someone
- Sharing earphones
- Licking an ice cream
- Kissing on the cheek
- Tears
- Drinking from the same water fountain
- Sharing earphones
- Door handles
- Money

Distribute copies of the blank game board to all participants. Instruct them to choose one word or phrase from the list they compiled and write it in each square. Explain that each participant should put the words in his or her own order, so that each board is unique. It is best if the learners write the phrases in full – HIV can not be transmitted by ‘kissing on the cheek’, while ‘kissing’ mouth-to-mouth is regarded as a low-risk activity.

As the students write on their game boards, the teacher should write each word or phrase on a separate small piece of paper. Deposit the slips into a container from which they can be drawn at random.

Play begins when the teacher draws a word out of the container and reads it aloud. Each player covers the space containing that word or phrase with a marker. Play continues until one person has five spaces covered in a row vertically, horizontally, or diagonally. This learner then scores one point. Repeat this until a learner scores three (or any number) points.
<table>
<thead>
<tr>
<th>Hugging</th>
<th>Swimming</th>
<th>Riding in a car</th>
<th>Mosquitoes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eating in a restaurant</td>
<td>Using the same towel</td>
<td>Licking an ice cream</td>
<td>Sneezes</td>
</tr>
<tr>
<td>Drinking from the same water fountain</td>
<td>Money</td>
<td>Holding hands</td>
<td>Sharing a glass</td>
</tr>
<tr>
<td>Sharing a classroom</td>
<td>Toilet seats</td>
<td>Using a public telephone</td>
<td>Dancing with someone</td>
</tr>
</tbody>
</table>
Bingo Sheet!
Section 3 - Attitudes to HIV/AIDS

This section describes two activities, Ten Differences, and Talking About Prejudice, which help group members to learn about and understand different attitudes to HIV and AIDS.

Ten Differences

Aims

This exercise encourages individuals to think clearly about the effects of prejudice on other people's lives.

What you will need

- Chairs in a circle
- Copies of the 'Build a Character Questionnaire' - allow for one between 4 or 5 people
- Paper and pens for each group member

Time:

About 60 minutes, depending on the size of the group.

What you do

1. Ask participants to divide into groups of 4 or 5, and hand out pens and one 'Build a Character Questionnaire' to each group

2. Ask groups to complete the questionnaire, thus building a character. Allow about 10 minutes for this.

3. Ask the small groups to imagine that their character is infected with HIV and to list 10 ways in which life will be different for the character because of this. Allow 10-15 minutes for this

4. Reassemble the group as a whole and ask each individual to say briefly whether any thing unexpected occurred to them and how they felt whilst doing this exercise.

Likely outcomes

This exercise sparks off lively discussion about prejudice. It can help identify any prejudiced beliefs which the group find it hard to let go of, and which require more thought and discussion.
Build a character questionnaire

1. Name: .................................

2. Age: .................................

3. Male/Female (Circle)

4. Who does ............................. live with? (parents, relations, other adults, other young people, alone)

5. Who are ............................. friends?

6. Does ................................. have a girl/boy friend? Married? Yes/No (circle). If yes what is their name?.................................

7. Does ................................. have any children? If yes, what are their names?.................................

8. Does ................................. have a job? Yes/No (circle) If so what is it doing? ........................................

9. What does ............................. do during leisure time? (sport, clubs, visit friends, listen to music, spend time with family)

10. What is ...............................
    favourite music .................................,
    favourite food .................................,
    favourite TV programme .................................
Talking about Prejudice

Aims

To encourage thought and discussion about prejudice and stereotyping. To examine the ways that different minorities are scapegoated and to look at negative reactions towards HIV and AIDS.

What you will need

- Large sheets of paper and pens.

Time

About 35-45 minutes, depending on the size of the group.

What you do

1. Ask the participants to divide into groups of four or five and give each group a large piece of paper and some pens.

2. Each group should then be asked to write a word in the centre of the paper. Half of the groups should write the word ‘Prejudice’ and the other half the word ‘AIDS’.

3. The groups are then asked to brainstorm as many words as they can which they associate with the title word. These words should be written in clusters around the title word.

4. Bring the whole group back together. Those groups who were allocated the word ‘AIDS’ should go through the words they came up with during their brainstorm. These words should be written up clearly for all the participants to see. When this is completed, the process should be repeated for the word ‘Prejudice’.

5. Encourage the participants to look for any similarities and draw parallels between the two lists.

Useful questions to pose might include

- What stereotypes do people associate with HIV and AIDS and prejudice against different groups?
- What media reporting do people find helpful and unhelpful?
- Which groups are most likely to experience prejudice?
- How are countries in other parts of the world portrayed in reports on HIV and AIDS?
- What role does prejudice play in talking about HIV and AIDS?
**Likely Outcomes**

The participants may come up with words such as 'stereotypes', 'media', and 'racism'. With the facilitator’s help participants will begin to draw parallels between some processes that underpin beliefs about HIV and AIDS, and prejudice.
Section 4 – Sex and HIV

This section describes two activities, Talking About Sex and Negotiating Sex.

Talking About Sex

Aims

To dispel embarrassment and to come up with words and phrases the group will be happy to use to talk about sex. This exercise may work best if the small groups are single sex, so ask the group before proceeding.

What you will need

- Chairs in a circle. Large sheets of paper and pens.

Time

About 30 - 40 minutes, depending on the size of the group.

What you do

1. Divide the whole group into smaller groups of 3 or 4.

2. Give each group a pen and a large sheet of paper.

3. Ask the small groups to brainstorm on words about sex for a few minutes, writing down phrases and words they know, and any feelings or thoughts which the word brings up. Are the words and phrases positive or negative?

4. Back in the main group, discuss how the brainstorm made participants feel. Compare lists of words. Do not insist on a contribution from everyone, as some may find it difficult to overcome their initial embarrassment.

5. Back in the main group, compare notes. The aim is to find words or phrases which are clear, easily understood, and non-offensive for future group use when talking about sex.

6. To finish off, if you wish to, you can write ‘offensive’ and ‘non-offensive’ on the whiteboard. And give out board-pens to the students. Invite them to write up their words and phrases in the appropriate column. When they have finished, you can ask if all students agree with the categorisations.

Likely outcomes

This exercise may help the group to overcome embarrassment and agree on words which are clear, easily understood and non-offensive when talking about sex.
Negotiating Sex

Aims

This exercise will help to enable young people to find ways of saying if, when and how they want to have sex when someone is encouraging them to do so.

What you will need

- Chairs in a circle.
- A worksheet with examples of things people might say if they’re going to encourage a partner to have sex. An example is available in this section but you may need to alter it to suit your group.
- Pens and paper.

Time

About 40-60 minutes, depending on the size of the group.

What you do

1. Ask the group to split into small groups of 3 or 5. Give each group pens and paper.
2. Each group should then brainstorm phrases and sentences which people use when trying to persuade a partner to have sex. Allocate copies of the "Persuading a partner to have sex" worksheet to those groups who need ideas. Each group should aim to have about ten statements. Allow 10-15 minutes for this.
3. Ask the group to break into pairs. Each pair needs to nominate 'A' and 'B' partners.
4. 'A' partners should start off by being the person who wants to have sex, and should read the first of their ten statements. Partner 'B' should then reply giving a reason why they do not want sex.
5. Partner 'A' continues until all the statements have been read, and partner 'B' has responded to them. This takes between 15-20 minutes.
6. When all the statements have been read, the partners exchange roles.
7. Ask the group to come back together and ask them how it felt when responding to the 'persuading' statements.
8. Some 'pairs' may be happy to act out their roles in front of the rest of the group, although no one should be forced to do so. This encourages further discussion.
Useful questions to pose might include:

- Was it difficult to think of responses?
- How did it feel to be refusing all the time?
- Are there other ways to challenge someone effectively?

Likely Outcomes

Young people will have had a chance to experience refusing sex with a partner (or future partner), as well as being refused or turned down. Young people who have not had a sexual relationship will find this exercise as useful as those who already have.

Example worksheet for negotiating sex

Persuading a partner to have sex

1. "I'll be very careful."
2. "If you really loved me you would."
3. "I haven't got AIDS so you've no need to worry."
4. "I've got some condoms now, so there's no excuse not to."
5. "Everyone else is doing it."
6. "I'll buy you something nice if you let me do it."
7. "I'm really turned on now - if we don't go the whole way I will be in agony!"
8. "I'll find someone else, then"
9. "There are names for people like you who lead others on."
Monitoring and Evaluation

After a session or a series of sessions, it is important to find out what new information the learners have acquired. Perhaps a quiz or a simple questionnaire can help to assess what has been learned. But it is also important to find out whether the attitudes and feelings of the learners have changed. It is also very important to listen to young people's own assessments of whether or not they are likely to act to protect themselves against HIV infection, and if not, then why not.

At the end of a series of sessions, a group quiz can be an effective and light-hearted of evaluating general levels of knowledge. Other ways of checking knowledge and attitudes might include getting group members to design a poster or a leaflet to publicise an AIDS helpline or giving information about safer sex. A survey of their friends attitudes to issues such as gay and lesbian rights, injecting drug use, condom use, and other relevant issues, can enable the learners to examine their own attitudes and to challenge the prejudices of others.

Monitoring in the group during the sessions also plays a part in forming an on-going evaluation of how successful the program has been. By observing the interactions of the learners during the program, you can gain some idea of whether the sessions have been useful, or whether some revision or other work is needed.

It may also be valuable to ask yourself the following questions:

- Did everyone contribute in the session(s), or did some dominate while others kept quiet?
- Which group members seemed most at ease? Why?
- Did anyone find the session(s) offensive or upsetting? What could be done to avoid this?
- In a mixed group, were there differences between the reactions and behaviour of the boys and the girls?
- Were there any racist or homophobic comments made or any victimisation of any of the group members?
- Did everyone seem to understand what was going on and the information that was available?
- How did the group cope with disruptive or rowdy members?
- Did any learners want to speak personally to the group?

After thinking about these issues, take some time to talk to the learners themselves what they thought of the activities. Did they find the sessions useful, and was there anything that they felt was not covered, or needed more attention?
Suggestions for follow-up work

1. Ask individuals to prepare and deliver a short talk on one of the issues surrounding HIV and AIDS.

2. Ask learners to write a letter to a local newspaper or radio station about one of these issues.

3. Provide some statistics (these can be found on www.avert.org), and ask people to produce a graphical illustration of the changing patterns of HIV transmission.

4. Create a project to design smart condom cases for use by different people.