

HIV 101



OBJECTIVES

At the end of this unit, participants will be able to:

- Clear up misconceptions regarding how HIV is transmitted
- Provide a brief overview of HIV and AIDS facts
- Help clients understand basic concepts about how HIV infection affects the body



INSTRUCTIONS

1. In preparation for the workshop, review the content of the worksheets and answer keys for the group activity. Arrange the room into small circles for group work, with four to five participants per group (depending on number of participants).
2. Welcome participants.
3. Review the unit objectives.
4. Distribute three handouts with worksheets and facilitate the activity and review correct answers.
5. Review slides 4 and 5 on definitions of HIV and AIDS.
6. If time allows, facilitate discussion about HIV and AIDS myths (slide 7). State 1 or 2 myths and ask participants to describe why it is a myth.
7. Review slides 6–9 about how HIV is and is not transmitted, and stages of HIV/AIDS progression. If time allows ask the class the following:
 - Who can explain what an unsuppressed viral load is to a client?
 - Who can explain what it means to be undetectable?
8. Ask participants “Are there new words/terms we learned and/or reviewed in this unit?” Have participants take turns calling out the new words/terms they learned and write them on newsprint.
9. Wrap up. Thank participants for their work.



Related C3 Roles

Building individual and community capacity, providing direct service

Related C3 Skills

Capacity building skills, professional skills and conduct, knowledge base



Method(s) of Instruction

Small group activity, facilitator-led group discussion, question and answer



Estimated time

60 minutes



Key Concepts

HIV, AIDS, STD/STIs, virus, acute, asymptomatic, symptomatic

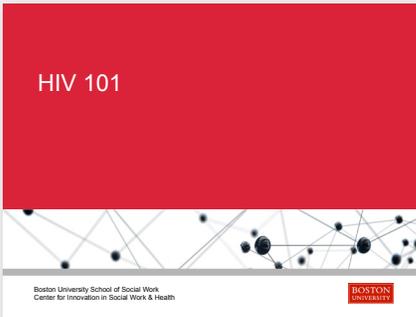


Materials

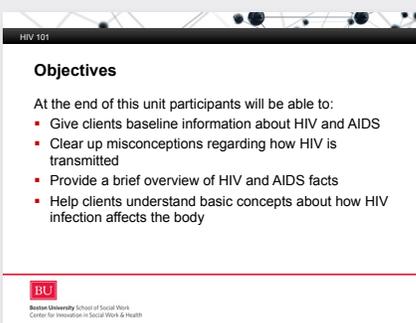
- Computer with internet access and projector
- PowerPoint slides
- Flip chart
- Markers

Handouts

- Worksheet #1: HIV 101—Understanding HIV and AIDS
- Worksheet #2: Modes of HIV Transmission
- Worksheet #3: What Stage Am I?
- The Stages of HIV Infection
- Worksheet #1 (Answer Key): HIV 101—Understanding HIV and AIDS
- Worksheet #2 (Answer Key): Modes of HIV Transmission
- Worksheet #3 (Answer Key): What Stage Am I?



SLIDE 1



SLIDE 2

Review the objectives.

Acknowledge that for some participants, this will be a review of what they already know, however, for others this is new information.



SLIDE 3

Worksheets and discussion

- Ask participants to complete the worksheets in their groups. Say, "Using your group's collective knowledge of HIV and AIDS, you will have 10 minutes to complete all 3 worksheets. Groups will write in their answers or best guess to each question." Explain the following details:
- Worksheets should be completed in order:
 - Worksheet #1: HIV 101 – Understanding HIV and AIDS
 - Worksheet #2: Modes of HIV transmission
 - Worksheet #3: What stage am I?
- The worksheets include fill in the blank, true/false, and multiple-choice questions.
- Each group should select two people: one recorder to write answers, and one reporter to give answers when the facilitator calls on the group.
- Each group will receive one point per each correct answer; no half points will be given, it's all or none.
- If a group gives an incorrect answer, the next group will have the opportunity to answer the question.
- If no group gives the correct answer, the facilitator will give the correct answer.
- Encourage participants to ask questions if they need assistance.

(continued)



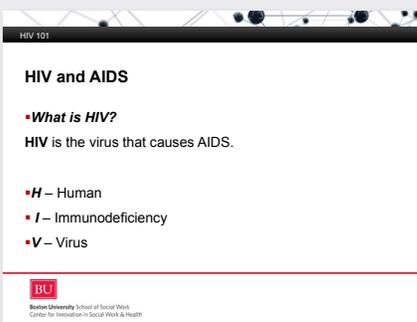
SLIDE 3 (continued)

Call on the groups to answer questions as follows:

- Group A, please answer question 1 on worksheet #1, HIV 101—Understanding HIV & AIDS.
 - What do the letters HIV and AIDS stand for?
 - What is HIV?
 - What is AIDS?
 - Now we've defined the acronyms HIV and AIDS.
 - Group A (you have 1 point)
- Group B, next question.

Continue with each group until all worksheet questions have been answered.

Bring attention to the last handout, Stages of HIV Infection, to be used as a resource. Point out that if people who acquire HIV remain untreated and do not engaged in medical care and/or take anti-retroviral HIV medications, most succumb to AIDS.



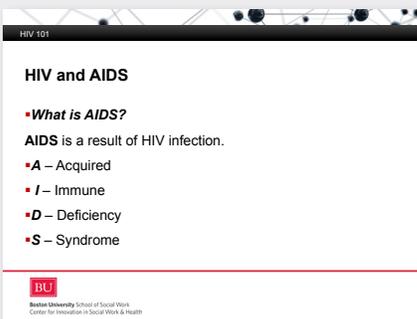
SLIDE 4

What is HIV?

The virus that causes AIDS

What do the letters H-I-V stand for?

- H-Human (one can only acquire HIV from humans, person-to-person, blood-to-blood, sexual contact and/or fluids).
- I-Immunodeficiency (affects the immune system, making it too weak to fight off disease and infection).
- V-Virus—it's survival depends on cells in the host.



SLIDE 5

What is AIDS?

AIDS is a result of HIV infection.

What do the letters A-I-D-S stand for?

- A-Acquired (must get it from someone)
- I-Immune (collection of cells and substances that act like soldiers against germs)
- D-Deficiency (weakens immune system causing opportunistic infections)
- S-Syndrome (collection of symptoms or illnesses)

HIV 101

HIV and AIDS

How **do** people contract HIV?

- By having vaginal, anal, or oral sex with someone who has HIV
- By sharing needles or syringes with someone who has HIV
- During pregnancy, birth, or breast feeding from a mother with HIV to her baby

Body fluids of a person living with HIV may include:

- Semen
- Blood
- Vaginal fluid
- Breast milk
- Any other body fluids containing blood

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HIV 101

HIV and AIDS

How can people prevent contracting HIV?

- People can choose not to have sex or use drugs.
- People can choose ways to be affectionate that **do not** transmit HIV or other STDs/STIs.
- If people have sex, using a latex condom (barrier) the **right way every time** greatly reduces the risk of contracting HIV and other STDs/STIs.

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SLIDE 6

Review the slide.

Additional notes:

- Injection drugs used either legally or illegally
- Safety precautions should be used for tattoos and body piercings

SLIDE 7

Review the slide.

Additional notes:

- Protected sex using a latex condom greatly lowers risk
- PrEP and HIV medication—PrEP means Pre-Exposure Prophylaxis, and it's the use of anti-HIV medications to keep HIV negative people from becoming infected. PrEP is approved by the FDA and has been shown to be safe and effective in preventing HIV infection
- Recent research indicates that people with HIV who have an Undetectable viral load are Untransmittable (otherwise known as U = U).
- These safety precautions will be discussed in more detail in later units.

If time allows, lead discussion about HIV and AIDS myths. Give two myths and ask participants to say why it is a myth.

People in the community say that a person with HIV is also living with AIDS. Why is this a myth?

Answer: This is a myth because people often call everything AIDS; but there is a difference. HIV is a virus; AIDS is a syndrome. Also, a person's CD4 count that is below 200 and/or has an opportunistic infection may be diagnosed by their doctor with AIDS. A person with CD4 above 200 is said to have HIV.

You can get HIV from a blood transfusion. Why is this a myth?

Answer: The risk of becoming infected with HIV from a blood transfusion in the United States is extremely low. Since donor interviews for HIV risks began in 1983 and HIV-antibody testing began in 1985, the risk of HIV-contaminated blood entering the blood supply has dropped dramatically. In 1992, antibody testing was expanded to include HIV-2 (in addition to HIV-1).

HIV 101

People Cannot Get HIV Through:

- Everyday social activity or through casual contact
- Handshakes
- Coughs or sneezes
- Sweat or tears
- Food
- Drinking fountains
- Straws, spoons, or cups
- Mosquito bites & other bug bites (ticks, lice, etc.)
- Sharing:
 - Toilets
 - Telephones
 - Office equipment
 - Clothing
 - Cooking or eating utensils
- Hugging, touching
- Attending church, school, or going to any public place with a person with HIV
- Working with someone who is HIV positive

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SLIDE 8

Review the slide.

The bottom line is, *people do not get HIV from casual contact.*

HIV 101

Stages of HIV/AIDS

- **Person contracts HIV**
- **Acute Infection** – occurs 2 to 4 weeks after initial transmission.
- Person may have flu-like symptoms:
 - Fever
 - Headache
 - Tiredness
 - Enlarged lymph glands
- **Chronic HIV Infection** – also called asymptomatic HIV infection or clinical latency. Chronic signs and symptoms are not present. Person may look healthy and feel well. People with chronic HIV infection may not have any HIV-related symptoms, but they can still transmit HIV to others (i.e. unless the person living with HIV has been undetectable for at least 6 months).
- **AIDS** - The virus weakens and eventually destroys the immune system. When a person with HIV develops AIDS, his or her body has lost most of its ability to fight off certain bacteria, viruses, fungi, parasites, and other germs.

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SLIDE 9

Review the slide.

HIV 101

Stages of HIV/AIDS

HIV Progression

Before HIV Infection Acute HIV Infection Chronic HIV Infection AIDS

Weeks to Months Years

CD4 cell HIV

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SLIDE 10

Review the slide. Participants can also follow along on the handout.

To conclude the session, ask participants to recall any new words or terms they have learned so far. Write them on the flip chart.

If time allows, ask participants the following:

- Who can explain what an unsuppressed viral load is to a client?
- Who can explain what it means to be undetectable?

To close, thank the participants for their participation and for doing a good job.

HIV 101: Understanding HIV and AIDS



Name: _____

Date: _____

1. Fill in the Blank: What does each acronym stand for?

H- _____
I- _____
V- _____

A- _____
I- _____
D- _____
S- _____

True or False

2. _____ AIDS is a virus that can cause the immune system to fail if left untreated.
3. _____ HIV is the virus that can lead to AIDS.
4. _____ You can become “undetectable” while living with AIDS even if your CD4 count is not above 200..
5. _____ You can have HIV without acquiring AIDS.
6. _____ Symptoms for HIV and AIDS are different for each person.
7. _____ A viral load that is not suppressed and undetectable viral load are the same.

Fill in the Blank

8. **AIDS** is a _____ or collection of conditions and symptoms, including infections and cancers caused by HIV. It is considered the _____ **stage of HIV**.
9. HIV is a virus that can lead to infections and destroys your _____ .
A person is considered to have **AIDS** when their CD4 count is less than _____ or if they have certain opportunistic infections.
10. **AIDS** is _____ meaning that you only get it after being infected with **HIV**, and it progresses over time.

HIV 101: Understanding HIV and AIDS - Answers



Name: _____

Date: _____

1. Fill in the Blank: What does each acronym stand for?

H- Human

A- Acquired

I- Immunodeficiency

I- Immune

V- Virus

D- Deficiency

S- Syndrome

True or False

2. False AIDS is a virus that can cause the immune system to fail if left untreated.

3. True HIV is the virus that can lead to AIDS.

4. True You can become “undetectable” while living with AIDS even if your CD4 count is not above 200.

5. True You can have HIV without acquiring AIDS.

6. True Symptoms for HIV and AIDS are different for each person.

7. False A viral load that is not suppressed and undetectable viral load are the same.

Fill in the Blank

8. **AIDS** is a syndrome or collection of conditions and symptoms, including infections and cancers caused by HIV. It is considered the final or end stage of HIV.

9. HIV is a virus that can lead to infections and destroys your immune system.

A person is considered to have **AIDS** when their CD4 count is less than 200 or if they have certain opportunistic infections.

10. **AIDS** is acquired meaning that you only get it after being infected with **HIV**, and it progresses over time.

HIV 101- Modes of HIV Transmission

True or False

1. _____ Modes of HIV Transmission are the ways that a person can contract HIV.
2. _____ There is a zero risk of transmission through oral sex.
3. _____ HIV can be spread through saliva, sweat, and tears, or coughing/sneezing.
4. _____ Kissing always poses a zero risk for being exposed to HIV.

Fill in the Blank

5. There are _____ actions of transmission and _____ fluids.

Modes of Transmission

A. Actions	B. Fluids
1.	1.
a.	
b.	2.
b.	
2.	3.
3.	4.

HIV 101- Modes of HIV Transmission- Answers

True or False

1. **T** Modes of HIV Transmission are the ways that a person can contract HIV.
2. **F** There is a zero risk of transmission through oral sex.
3. **F** HIV can be spread through saliva, sweat, and tears, or coughing/sneezing.
4. **F** Kissing always poses a zero risk for being exposed to HIV.

Fill in the Blank

5. There are **3** actions of transmission and **4** fluids.

Modes of Transmission

A. Actions	B. Fluids
1. Condomless Sex <ol style="list-style-type: none">a. Analb. Vaginalb. Oral sex	1. Semen (cum or pre-cum)
2. Sharing needles/Drug “works”	2. Blood
	3. Vaginal, Anal, or Rectal fluids
3. Breastfeeding	4. Breast Milk

HIV 101: Stages of HIV/AIDS

Name: _____

Date: _____

Stages of HIV Infection – Complete questions 1-3 using the terms below:

Chronic HIV Infection

AIDS

Acute HIV Infection

1. _____ CD4 count of less than 200 cells/mm³ or if they have certain opportunistic infections*. This is the final, most severe stage of HIV infection; without treatment patients are at high risk of opportunistic infections the body can't fight off.
2. _____ During this stage, HIV continues to multiply but at very low levels. HIV related symptoms may not be present; CD4 cell count and viral load is monitored for progression of HIV disease.
3. _____ Develops about 2 to 4 weeks after initial infection with HIV. During this stage, the virus undergoes massive replication; some people have flu like symptoms, such as fever, headache, and rash.

*Opportunistic infections are infections and infection-related cancers that occur more frequently or are more severe in people with weakened immune systems than in people with healthy immune systems.)

True or False

- _____ People in the Acute stage may not feel sick, but the level of HIV in the blood is very high; this increases risk of HIV transmission.
- _____ The Chronic stage sometimes called asymptomatic HIV infection can last decades; most don't advance to AIDS even if the person is not taking HIV medication.
- _____ AIDS is the most severe phase of HIV infection. Without treatment, the CDC estimates the average survival rate to be three years once AIDS is diagnosed.
- _____ A person cannot have AIDS related symptoms or opportunistic infections if their CD4 count is above 200.

HIV 101: Stages of HIV/AIDS - Answers

Name: _____

Date: _____

Stages of HIV Infection – Complete questions 1-3 using the terms below:

Chronic HIV Infection

AIDS

Acute HIV Infection

1. **AIDS**

CD4 count of less than 200 cells/mm³ or if they have certain opportunistic infections*. This is the final, most severe stage of HIV infection; without treatment patients are at high risk of opportunistic infections the body can't fight off.

2. **Chronic HIV Infection**

During this stage, HIV continues to multiply but at very low levels. HIV related symptoms may not be present; CD4 cell count and viral load is monitored for progression of HIV disease.

3. **Acute HIV Infection**

Develops about 2 to 4 weeks after initial infection with HIV. During this stage, the virus undergoes massive replication; some people have flu like symptoms, such as fever, headache, and rash.

*Opportunistic infections are infections and infection-related cancers that occur more frequently or are more severe in people with weakened immune systems than in people with healthy immune systems.)

True or False

True

People in the acute stage may not feel sick, but the level of HIV in the blood is very high; this increases risk of HIV transmission.

False

The Chronic stage sometimes called asymptomatic HIV infection can last decades; most don't advance to AIDS even if the person is not taking HIV medication.

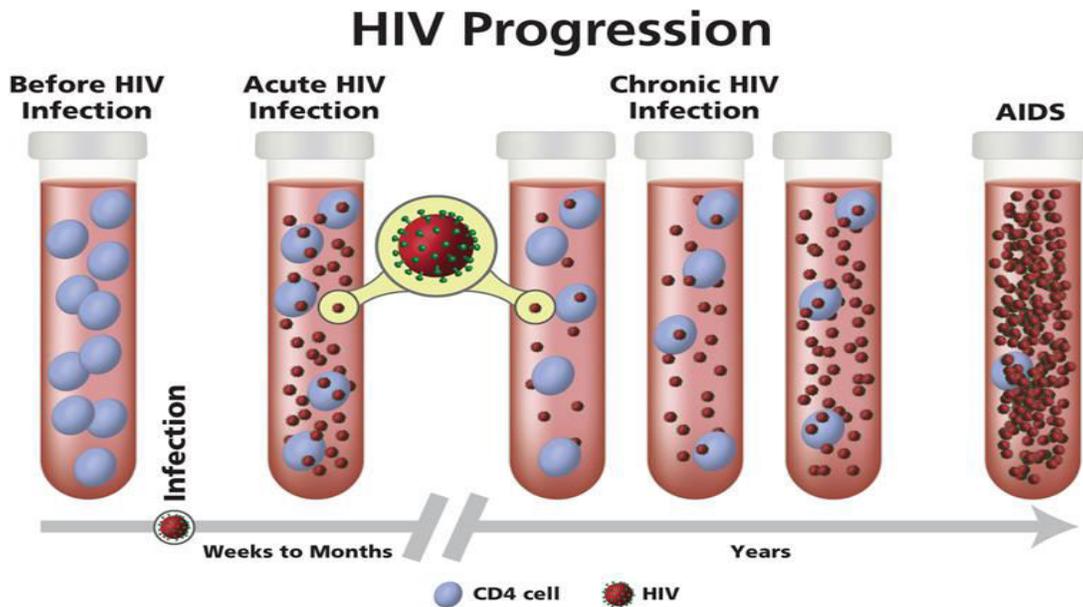
True

AIDS is the most severe phase of HIV infection. Without treatment, the CDC estimates the average survival rate to be three years once AIDS is diagnosed.

False

A person cannot have AIDS related symptoms or opportunistic infections if their CD4 count is above 200.

The Stages of HIV Infection – Understanding HIV/AIDS



There are three stages of HIV infection:

1. Acute HIV Infection

Acute HIV infection is the earliest stage of HIV infection, and it generally develops within 2 to 4 weeks after infection with HIV. During this time, some people have flu-like symptoms, such as fever, headache, and rash. In the acute stage of infection, HIV multiplies rapidly and spreads throughout the body. The virus attacks and destroys the infection-fighting [CD4 cells](#) of the immune system. During the acute HIV infection stage, the level of HIV in the blood is very high, which greatly increases the risk of HIV transmission.

2. Chronic HIV Infection

The second stage of HIV infection is chronic HIV infection (also called asymptomatic HIV infection or clinical latency). During this stage of the disease, HIV continues to multiply in the body but at very low levels. People with chronic HIV infection may not have any HIV-related symptoms, but they can still spread HIV to others. Without treatment with HIV medicines, chronic HIV infection usually advances to AIDS in 10 years or longer, though in some people it may advance faster.

3. AIDS

AIDS is the final, most severe stage of HIV infection. Because HIV has severely damaged the immune system, the body can't fight off [opportunistic infections](#). (Opportunistic infections are infections and infection-related cancers that occur more frequently or are more severe in people with weakened immune systems than in people with healthy immune systems.) People with HIV are diagnosed with AIDS if they have a CD4 count of less than 200 cells/mm³ or if they have certain opportunistic infections. Without treatment, people with AIDS typically survive about 3 years.

Fact sheet courtesy of [AIDSinfo](#), a service of the U.S. Department of Health and Human Services.

Sources: <https://aidsinfo.nih.gov/understanding-hiv-aids/fact-sheets/19/46/the-stages-of-hiv-infection>

From HIV.gov: What Are HIV and AIDS?

From the Centers for Disease Control and Prevention (CDC): About HIV/AIDS

Acknowledgments

This curricula draws from and is adapted from other training curricula for peer educators and community health workers, such as the Building Blocks to Peer Success (<https://ciswh.org/resources/HIV-peer-training-toolkit>) and the Community Capacitation Center, Multnomah County Health Department (<https://multco.us/health/community-health/community-capacitation-center>)

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