Using ICT in teaching Life Skills Education

**Class**: Grade 8  
**Number of pupils**: 45  
**Time**: 1 day – 9:00- 1:45 (Two 30 minutes breaks in between)

**Topic**: HIV/AIDS –Care and support for persons living with HIV/AIDS

**Objectives**: 
Pupils will be able to
- Appreciate living with persons living with HIV/AIDS
- Care for persons living with HIV/AIDS
- Support persons living with HIV/AIDS
- Accept that persons living with HIV/AIDS are human being and needs to be cared for

**Resources**: 
- Case study of persons living with HIV/AIDS prepared and saved in the computer in my document  
  (Reference: [Http://unodc.orgpdf/youthnet/action/message/escap_peers-09](Http://unodc.orgpdf/youthnet/action/message/escap_peers-09))
- Pictures of persons living with HIV/AIDS posted in the computer in my document
- CDs/DVDs of case studies of person living with HIV/AIDS- (Case study Gambia)
- Interactive activities on how to care and support persons living with HIV/AIDS  
  (Reference: [Http://unodc.orgpdf/youthnet/action/message/escap_peers-09](Http://unodc.orgpdf/youthnet/action/message/escap_peers-09))
- Projector

**Activities**: 
- Pupils work individually and in pairs using the information posted in the Computer.
- As a result of only having two computers, Pupils can connect a projector to one computer to watch the case studies.
- The use of Whole-class teaching/learning using the computer and projector by teacher or pupils
- In small groups pupils discuss the case studies and react to the different challenges they face
- As individuals, pupils are asked to imagine they were persons living with HIV/AIDS and write about how they would want be supported and cared for. Pupils produce a write up using the computer. This they can do at their own time before the end of the day
- Pupils use Independent consolidation leading to self-assessment.
- Pupils come up with a creative project work. They chose what they want to write on and write which they can upload into the project folder at a later date to be determined by pupils.( between 2 to 3 days)
Assessment:

- Self assessment with the help of the questions used in the discussion
- Pupils at the end of the activities, write what they have learnt and how they would care for and support a person living with HIV/AIDS. This they print and paste on the wall. They put their write ups and save it in a word document
- Creative project work

Exercises, case studies and activities in the computer

General information
Globaly, at the end of 2002, there were 42 million people living with HIV/AIDS (PLWHAs), 19 million of them women and more than 3 million of them children under 15 years of age. Currently, about 5 million people are acquiring HIV each year. Prevalence rates have risen sharply in virtually every region of the world in the past decade. Projections for 126 low and middle-income countries showed that an additional 45 million people would become infected between 2002 and 2010 in the absence of concerted and robust prevention efforts.
Asia and the Pacific now accounts for one in every five new HIV infections worldwide. In all, over 8 million people were living with the virus in the region at the end of 2002; 2.6 million of who were young people aged 15 to 24.

Living healthy and productive lives
People living with HIV/AIDS can live healthy and productive lives when they have access to information, treatment, care and support.

Information includes knowing what your rights are in terms of employment, welfare, education and family life, and having clear information about treatment and how to get treatment. It also means knowing about property rights, personal laws related to divorce, alimony and custody of children. Personal laws gain importance in the context of women, as they are likely to face more discrimination and harassment on being diagnosed with HIV/AIDS.

Support means acceptance, affection, respect and love from friends and family and from the community. It also means supportive laws to protect against discrimination and stigmatization.

Care includes moral support and access to necessary medical treatments, a healthy diet, clean water and accommodation. Although key human rights, such as the right to information, the right to life and the right to health create entitlement to care and support, most young people (especially young women) living with HIV/AIDS do not have full access to these services. The situation is worse for young people belonging to marginalized groups, such as sex workers, homosexuals and injecting drug users. The realization of human rights and other constitutional rights is not simply a matter of state action to develop laws and policies that protect against discrimination and stigma. Advocacy for public policies and legal action is also very important. However, this is not enough to transform the reality at the grassroots. When it comes to improving the daily lives of people living with HIV/AIDS the community, family and friends have to play an important and dynamic role.
Scenario for group 1
Amadou is 22 years old. He is living with his parents and siblings in a small town. He is living with HIV, but healthy. His family is supportive of him, but he wants to work. He has applied for many jobs, but nobody is willing to employ him. He is feeling very depressed and lonely.

- What kind of help does Amadou need?
- Where and how can he get help and support?

Scenario for group 2
Mariama is 19 years old. She is not educated and has been living in the slum of a large metropolitan city. She works as a waitress in one of the bars. She is living with HIV and prone to frequent illnesses. She is very sacred and alone. Her friends are unable to help her, as they do not have the time and the resources. She goes to the local health care centre for treatment but she is unable to buy the medication they prescribe.

- What kind of help does Mariama need?
- Where and how can she get help and support?

Scenario for group 3
Gibbou is 16 years old. He lives on the street, as he has no family. He is a drug user and a sex worker. He is very ill and the doctors have told him that he has TB. His friends take care of him but they cannot ensure regular treatment and care. Gibbou is very ill and unable to do anything for himself.

- What kind of help does Gibbou need?
- Where and how can he get help and support?

Scenario of group 4
Saly is in the hospital. She has been in the hospital for the last month but she wants to go home. Her family members think that she should stay in the hospital as they do not have the time and do not know how to take care of her. S is becoming depressed and restless.

- What kind of help does Saly need?
- Where and how can she get help and support?

Scenario for group 5
Mama is 24 years old. She is widowed and has one child who is also HIV positive. She lives alone with her child and works as a clerk in a bank. She is very worried about the future of her child. She is frequently depressed with the prospect of her own death and the effect it will have on her child. Her husband’s family refuses to help her and have denied her all rights to her husband’s insurance money. Of late, Mama has been falling sick, but she refuses to take her medication.

- What kind of help does Mama need?
- Where and how can she get help and support?

Scenario for group 6
Omar is 21 years old. He is working in an advertising agency and has many friends. They support him and take care of him when he is sick. His partner is also very loving and supportive, but Omar is obsessed with the idea of death. He is loosing weight and ignoring his doctor’s instructions. He is slowly loosing interest in his work and refusing his friends’ offers of help. He lies in bed for days on end and refuses to respond to anyone.

- What kind of help does Omar need?
- Where and how can he get help and support?

Case study that may be used for this exercise:
Mr. Jobe lives in a town in Gambia. He went to a hospital for an HIV/AIDS test because he was loosing weight and coughing. Due to his cough the doctor also checked him for Tuberculosis (TB). The results of both tests were positive. The doctor started Mr. Jobe on TB treatment while he was in the hospital, but when Mr. Jobe was coughing less he was sent home and referred to the home-
based care team of a local church. The team came to Mr. Jobe’s house to ensure that he took his medication. He shouted at them and told them not to come back. The team persuaded Mr. Jobe to see the medical officer who listened carefully and realized that Mr. Jobe was afraid that his neighbours would see the team visiting him. As a result, the people would realize that he has TB and reject him. So, the team helped Mr. Jobe to talk to a trust worthy relative. The relative learnt to help Mr. Jobe take his drugs every day and go for check ups at the hospital. Mr. Jobe’s TB was controlled and he started to feel much happier.

- Where did Mr. Jobe go for his HIV/AIDS test and TB treatment? What support did he receive from the hospital staff?
- Who did the doctor refer him to for home-based care?
- What support did Mr. Jobe receive from the home-based care team?
- Why does Mr. Jobe feel happy and healthy?

Peer help
Assuming the responsibility to provide information, care and support to their peers living with HIV/AIDS is a task in which youth can make a very big difference. Offering friendship, providing access to information on care, setting up home visiting programmes for those who are sick and organizing support services are some of the possible actions they can take.

A good place to start showing your solidarity may be within your group or family or with colleagues and relatives.

Don’t fear or falter!
- If you know that someone in your group has HIV or AIDS, make sure that friends who are already aware of his/her condition know that it is safe to touch, hug, share food and be together socially.
- If your HIV/AIDS infected friends want you to maintain confidentiality, respect their wishes.
- Don’t forget to show your concern, affection and love.
- If the person is sick, help out with cooking, shopping, getting medication, cleaning or simply talking about his/her feelings.
- To address stigmatization and discrimination at the work place create awareness about rights in the work place of people living with HIV/AIDS.
- Advocate for behaviour and conduct that are supportive of people living with HIV/AIDS.

A good starting point is to listen to experiences of people living with HIV/AIDS. Listen carefully and list the ways in which they think they could have been helped. Add any others that you can think of and discuss it together.

- Say hello
- Invite him/her to lunch or dinner, a movie or a walk
- Just listen
- Hold his/her hand
- Discuss the future
- Celebrate special days and anniversaries
- Ask how you can help
- Run errands and pick up medication
- Give a hug
- Clean the house
- Give a small token of affection and care
- Invite others to spend time together

Needs of a Person Living with HIV/AIDS
Use the following question for discussion
What did you learn from this exercise?

The case study mentions some of the needs and solutions for a person living with HIV/AIDS; can you think of other needs/requirements of a person living with HIV/AIDS?

In your opinion would the needs and requirements of a man and woman be similar? Why and why not?

List some of the needs/requirements that would be different for a man and woman

Can you think of ways in which you can help a person living with HIV/AIDS?

How? You are living with HIV/AIDS how do you want to be support. Make a list of what you would want to do and see.

What Knowledge, Skills, attitudes and behaviours do you need to care and support persons living with HIV/AIDS? Discuss this in your groups.

Examples of skills and knowledge you need to care for and support persons living with HIV/AIDS

**Knowledge**
- Basic of HIV/AIDS
- Nutrition
- Health education
- Positive living
- HIV/AIDS related treatment related to symptoms and causes, common problems, drugs and new treatments
- Human rights issues
- Psychosocial issues
- Vocational possibilities

**Skills**
- Communication related to asking questions, listening and confirming
- Planning/managing in consultation with the PLWHA
- Follow up and referral
- Training Counselling
- Building trust
- Moving at the PLWHAs pace
- Sharing information

**Attitudes**
- Compassion
- Respect
- Sensitive
- Non-judgmental
- Honesty
- Common sense
- Equality
- Positive and encouraging

**Behaviours**
- Listening
- Giving a hug
- Discussing feelings and concerns
- Helping in chores and running errands
- Picking up medication and giving medication