PREVENTION OF HIV/AIDS AND OTHER STDS: A GENERAL GUIDE TO IMPLEMENTING A PREVENTION PLAN

ADULT EDUCATION
PREVENTION OF HIV/AIDS AND OTHER STDS: A GENERAL GUIDE TO IMPLEMENTING A PREVENTION PLAN

ADULT EDUCATION
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTRODUCTION</td>
<td>2</td>
</tr>
<tr>
<td>A BRIEF ACCOUNT OF THE PILOT PROJECTS</td>
<td>3</td>
</tr>
<tr>
<td>ISSUES OF PREVENTION</td>
<td>6</td>
</tr>
<tr>
<td>BASES FOR ACTION IN AN EDUCATIONAL APPROACH</td>
<td>7</td>
</tr>
<tr>
<td>FOCUSES OF INTERVENTION RECOMMENDED BY THE DIRECTION DE LA FORMATION GÉNÉRALE DES ADULTES</td>
<td>7</td>
</tr>
<tr>
<td>METHODS OF INTERVENTION PUT FORWARD BY THE DIRECTION DE LA FORMATION GÉNÉRALE DES ADULTES</td>
<td>8</td>
</tr>
<tr>
<td>THE PROCESS OF IMPLEMENTING A PREVENTION PLAN</td>
<td>9</td>
</tr>
<tr>
<td>CONCLUSION</td>
<td>15</td>
</tr>
</tbody>
</table>

## APPENDIXES

<table>
<thead>
<tr>
<th>Appendix</th>
<th>Step</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>APPENDIX 1</td>
<td>STEP 1: FOUNDATIONS OF A PROCESS</td>
<td>17</td>
</tr>
<tr>
<td>APPENDIX 2</td>
<td>STEP 2: COLLECTION OF INFORMATION</td>
<td>19</td>
</tr>
<tr>
<td>APPENDIX 3</td>
<td>STEP 3: LINES OF ACTION</td>
<td>21</td>
</tr>
<tr>
<td>APPENDIX 4</td>
<td>STEP 4: TRIAL ACTIVITIES</td>
<td>23</td>
</tr>
<tr>
<td>APPENDIX 5</td>
<td>STEP 5: IMPLEMENTATION OF A PREVENTION PLAN</td>
<td>25</td>
</tr>
</tbody>
</table>
INTRODUCTION

In 1989, an interministerial committee was formed jointly by the MEQ and the MSSS to examine AIDS, the several varieties of hepatitis and other sexually transmitted diseases (STDs). Its mandate was to support the creation of prevention activities in various administrative units of the Ministère de l’Éducation (MEQ), based on the Stratégie québécoise de lutte contre le sida, phase 4, as developed by the Ministère de la Santé et des Services sociaux (MSSS).

The committee continues to carry out its functions and produces an annual activity plan, the most recent of which covered the years 2001 to 2003. A representative of the Direction de la formation générale des adultes (DFGA) sits on the committee, which is chaired by the Centre québécois de coordination sur le sida (CQCS).

As part of the committee’s mandate, and in collaboration with the CQCS, the DFGA has undertaken to produce and distribute, for personnel working in the adult education services of school boards, a discussion paper and prevention plan that focuses on educational intervention targeting the prevention of HIV/AIDS and other STDs. It was this context that led to the design of the present document, Prevention Of HIV/AIDS and Other STDs: A General Guide to Implementing a Prevention Plan.

The purpose of this document is:

- to support the start-up of an intervention project for the prevention of AIDS/HIV and other STDs in the schools, in collaboration with various social partners;
- to allow adult learners and adult education personnel to orient themselves and take greater responsibility for current issues related to HIV/AIDS and other STDs;
- to encourage the development of an educational approach appropriate to the needs and resources of the community.

This Guide is based on data collected in two pilot projects carried out at the Centre Louis-Jolliet of the Commission scolaire de la Capitale in Québec City and at the Centre Saint-Louis-de-Gonzague of the Commission scolaire des Chênes in Drummondville.

The DFGA would like to thank all those who, in their various capacities, contributed to the success of these experiments.
The Centre Louis-Jolliet was selected to host the first pilot project and the Centre Saint-Louis-de-Gonzague was invited to undertake the second. The projects began in the fall of 1999 and continued until the spring of 2001.

The Centre Louis-Jolliet was chosen because of its urban character. This adult education centre serves, for the most part, adult learners from the central districts of Québec City.

The project was proposed to teachers first. During the course of its development, it involved all the personnel and adult learners at the centre. Community organizations were also consulted and some of them participated in activities related to the project.

The Centre Saint-Louis-de-Gonzague was chosen for its semi-urban and rural character. As such, it offered a different, complementary environment providing new perspectives and ways of approaching the prevention of HIV/AIDS and other STDs.

This second project began by involving teachers and adult learners. Community organizations quickly joined in the process.
The principal needs identified by the adult learners and the different educational personnel regarding an educational response to these issues were:

**ADULTS**

- Awareness through talks given by people living with AIDS and meetings with them.
- Discussions among adult learners, in separate and mixed groups (men and women), on prevention practices and the management of risks.
- Information and group leadership in the schools through various activities: information kiosques, student newspapers, brochure stands, quiz games, etc.
- Testing and actions to direct people toward helping organizations (CLSCs, community groups, etc.).

**PERSONNEL**

- Access to intervention tools and resource persons.
- Training in listening to problems related to sexuality (interpersonal skills).
- Broader understanding of knowledges and skills in the area of sex education.

**RESULTS OF THE PILOT PROJECTS**

**In terms of individuals**

- All those involved in the experiments felt better informed and equipped to deal with the problems of HIV/AIDS and other STDs.

**In terms of the group** (in the training centres)

- The results show that the success of this type of project depends on the participation of teachers and the support of the administration of the training centre.
- It became evident that there is a real need for professional development among the various categories of personnel.

**In terms of partnerships**

- It became clear that adult education centres should work more often in cooperation with community organizations and the public health system (regional offices, CLSCs, etc.).
- Results show that collaboration between internal and external partners is desirable at the outset of the development of an STD/HIV/AIDS prevention plan.
THE FOLLOWING PEOPLE CONTRIBUTED TO THE PILOT PROJECTS AT THE CENTRE LOUIS-JOLLIET AND THE CENTRE SAINT-LOUIS-DE-GONZAGUE.

**Commission scolaire de la Capitale, Centre Louis-Jolliet**

Denise Beauchesne, education consultant  
Pierre Berthelot, Centre de santé publique de Québec  
Louison Bolduc, vice principal  
Denys Careau, student life animator and resource person  
Isabelle Castonguay, student trainee in social services  
Hélène Dufour, French teacher  
Noé Dufour, counsellor in academic training  
Céline Lecompte, guidance counsellor  
Jocelyne Pelletier, literacy teacher  
Isabelle Poirier, student trainee in social services  
Hélène Robin, French teacher  

A group of twenty adult learners at the Centre Louis-Jolliet

**Commission scolaire des Chênes, Centre Saint-Louis-de-Gonzague**

André Beaudry, Bureau local d’intervention traitant du sida (BLITS)  
Sébastien Blais, adult learner  
Carmel Brind’Amour, mathematics teacher  
Hélène Brind’Amour, French teacher  
Sylvie Daudelin, adult learner  
Claude Demontigny, Centre Domrémy, Mauricie and Centre-du-Québec  
Yves Hébert, counsellor in academic training and resource person  
Denise Héroux, graduate nurse, health and sexuality, CLSC Drummondville  
Annie Jean, Bureau local d’intervention traitant du sida (BLITS)  
Pierre Lavigne, French teacher  
Andrée Lavoie, literacy teacher  
François Nicole, animator  
Annie Patenaude, adult learner  
Cécile Pelchat, French teacher  
Marie-Marthe Pineault, social worker, CLSC Drummondville  
Claudette Raymond, English teacher  
Jean-Marie Richard, Refuge la Piaule  
Marcel Touchette, principal  

A group of ten adult learners at the Centre Saint-Louis-de-Gonzague

**Consultants**

Carmen Allison, education consultant  
France Delagrave, health promotion consultant

**Projet director**

Richard Lemieux, Direction de la formation générale des adultes
To consider the vulnerability of people is to become aware of the facts of their lives, and consequently, to choose the most appropriate interventions.

**ISSUES OF PREVENTION**

Human lives are conditioned by personal values, attitudes and behaviours. Various factors interact with each other to predispose individuals toward safe or unsafe actions in all areas of life.

Infection with HIV, the virus that causes AIDS, together with other diseases that are generally transmitted through sexual contact (STDs), are a serious problem because of their consequences for the well-being of those infected and of those close to them, and their socio-economic cost to society. At the end of the 20th century, the direct and indirect costs of these diseases was very high, running in the millions of dollars.

The purpose of prevention, as regards these diseases, is to reinforce safe attitudes and behaviour among those who already practise them and to encourage these practices among those who do not yet do so.

HIV and the other sexually transmitted diseases have no preferences regarding the values, lifestyles, culture, social status, sex or sexual orientation of the people they are likely to affect.

It is important to understand that the two most common methods of transmission are:
1. Unprotected sexual activities;
2. Shared use of needles and syringes among drug users.

For many people, an awareness of the methods of transmission and means of protection does not ensure that they will continue to practise or adopt safe behaviours. Difficult living conditions or precarious personal situations can cause these people to disregard their own protection and that of others.

If these people also happen to be in a situation marked by poverty, drug abuse, mental illness, itinerancy, discrimination, incarceration or prostitution, they are all the more vulnerable to HIV.

It is therefore important to keep in mind the context in which personal attitudes and behaviours occur in order to better understand why people do or do not take precautions to reduce the risk of infection by the virus and other sexually transmitted diseases.

BASES FOR ACTION  
IN AN EDUCATIONAL APPROACH

- Encouraging an open educational approach, based on respect, openmindedness and confidentiality.
- Taking into consideration the whole person.
- Encouraging the development of individuals’ potential for action (knowledge, expertise and interpersonal skills).
- Mobilizing training centre personnel to stimulate an internal dynamic.
- Supporting collaborative efforts and partnerships with community organizations.

FOCUSES OF INTERVENTION RECOMMENDED BY THE  
DIRECTION DE LA FORMATION GÉNÉRALE DES ADULTES

The focuses of intervention have been identified from two sources: the health sector document entitled *Stratégie québécoise de lutte contre le sida*, and the adult education sector document entitled *Déclaration de la cinquième Conférence internationale sur l’éducation des adultes*.

The DFGA approves of the set of focuses of preventive intervention as set out in the *Stratégie québécoise de lutte contre le sida, phase 4, Orientations 1997-2002* (prevention section), in particular the focuses below, which are related to the educational mission of the MEQ:

- **To pursue actions that target the adoption and maintenance of safe behaviour.**
  “Since everyone is at a different stage in terms of prevention of STDs and AIDS... it is important to diversify approaches, content of messages and educational activities and to segment interventions to make preventive actions more effective.” (p. 13)

- **To intervene before problems begin.**
  “In this respect, education in sexuality is a key sector. Approaching sexuality in a broader perspective helps to make safe behaviour more meaningful.” (p. 14)

- **To encourage the potential for action among those who are vulnerable.**
  “To equip people so as to enable them to assume responsibility for themselves.” (p. 14)

The commitments mentioned in the *Déclaration de la cinquième Conférence internationale sur l’éducation des adultes*, organized by UNESCO in Hamburg in 1997, also deal with this issue.

- **To produce educational programs.**
  “To design [educational activities] that enable men and women to understand the relations between the sexes and human sexuality in all its dimensions.” (commitment 13)

- **To develop educational content.**
  “To develop educational content concerning health, especially the prevention of AIDS and other diseases, nutrition and mental health.” (commitment 37)
METHODS OF INTERVENTION PUT FORWARD BY THE DIRECTION DE LA FORMATION GÉNÉRALE DES ADULTES

The DFGA, in collaboration with school boards, plans to support the following types of actions:

- Participation in sexual education activities designed to give meaning to the development of safe behaviour.
- Participation in theme activities to increase community awareness (talks, debates, etc.).
- Participation in activities related to the establishment of partnerships for joint intervention.
THE PROCESS OF IMPLEMENTING A PREVENTION PLAN

This guide proposes a five-step process for implementing a prevention plan. A data sheet is included for each step. The process is based on the experience of the two pilot projects.

The five steps proposed are:

**STEP 1: FOUNDATIONS OF A PROCESS**
The first step is to evaluate the possibilities for implementing a prevention plan in the school environment.

**STEP 2: COLLECTION OF INFORMATION**
The collection of information serves to identify the expectations and needs of the school population, according to different areas of intervention.

**STEP 3: LINES OF ACTION**
In this step, a list of activities is drawn up and those that can be implemented in the school are selected.

**STEP 4: TRIAL ACTIVITIES**
The trial activities carried out will guide the formulation of a prevention plan.

**STEP 5: THE IMPLEMENTATION OF A PREVENTION PLAN**
The last step consists in drafting the prevention plan to be implemented and submitting it for official approval.

The Focus of a Prevention Plan and the Adaptation of the Process to the Environment

The following pages present data sheets for each of the five steps. They contain proposals for specific objectives, necessary conditions, means of achievement, expected results, planning elements and useful documents. These suggestions are based on the experience of the two pilot projects.

The information presented in the sheets will be relevant to urban, semi-urban and rural communities. However, the process and the steps must be adapted specifically to the training centre’s organizational context, its internal resources and the partnerships it may form. Tips on carrying out the different steps are provided in the appendixes of this document.
PREVENTION OF HIV/AIDS AND OTHER STDS:
A GENERAL GUIDE TO IMPLEMENTING A PREVENTION PLAN

Secure the support of the training centre administration before undertaking a process leading to the implementation of an STD/HIV/AIDS prevention plan.

Appoint a person in charge of the process.

Define the mandate of the person in charge of the process for implementing a prevention plan.

Reference documents on the issues in question.

Statistical data on the progression of HIV/AIDS and other STDs.

Profile of the target population.

Information on activities already carried out in the centre (activities with a group leader, training sessions, awareness activities, etc.).

Instructional and promotional materials.

Directory of resources (public, parapublic and community organizations).


FOUNDATIONS OF A PROCESS

SPECIFIC OBJECTIVE

To evaluate the possibilities of implementing a prevention plan in the training centre.

NECESSARY CONDITIONS

Secure the support of the training centre administration before undertaking a process leading to the implementation of an STD/HIV/AIDS prevention plan.

Appoint a person in charge of the process.

Define the mandate of the person in charge of the process for implementing a prevention plan.

USEFUL DOCUMENTS

SPECIFIC OBJECTIVE

To evaluate the possibilities of implementing a prevention plan in the training centre.

NECESSARY CONDITIONS

Secure the support of the training centre administration before undertaking a process leading to the implementation of an STD/HIV/AIDS prevention plan.

Appoint a person in charge of the process.

Define the mandate of the person in charge of the process for implementing a prevention plan.

MEANS OF ACHIEVEMENT

Holding a discussion meeting on:

– the issues and concerns of the community;
– the educational approach;
– the focuses of intervention to be emphasized;
– the target populations (adult learners, personnel, partners);
– the potential for success of a prevention plan at the training centre.

Forming a basic committee.

EXPECTED RESULTS

Interim report on the possibilities of implementing an STD/HIV/AIDS prevention plan (Appendix 1):

– summary of ideas and progress report;
– characteristics of the target populations;
– inventory of training centre resources (human, material, financial);
– success factors of the process;
– identification of possible sources of financing;
– list of members of the basic committee and name of the person in charge of the process;
– validation of the interim report by the authorities concerned.

PLANNING ELEMENTS

The discussion meeting may involve six to twelve people, depending on the size of the training centre.

The basic committee may be composed of two or three persons (the person in charge of the process and colleagues).

USEFUL DOCUMENTS

Reference documents on the issues in question.

Statistical data on the progression of HIV/AIDS and other STDs.

Profile of the target population.

Information on activities already carried out in the centre (activities with a group leader, training sessions, awareness activities, etc.).

Instructional and promotional materials.

Directory of resources (public, parapublic and community organizations).

COLLECTION OF INFORMATION

SPECIFIC OBJECTIVES

- To identify the expectations and needs of the target populations.
- To arrange activities according to an educational approach and different focuses of intervention.
- To mobilize internal and external resources to collect information.

NECESSARY CONDITIONS

- Secure the support of the educators involved.

MEANS OF ACHIEVEMENT

- Adoption of a strategy for collecting information for an educational approach according to different focuses of intervention.
- Sharing of tasks in the basic committee.
- Preparation of promotional materials (posters, brochures, information on Intranet, student radio, student newspaper, etc.).
- Preparation and leadership of meetings on various subjects in order to identify the expectations and needs of target populations. Examples of topics for discussion:
  - awareness of the issues of HIV/AIDS and other STDs;
  - habits and beliefs;
  - feelings of responsibility;
  - influences;
  - resistance and prejudices;
  - methods of promoting sensitivity and awareness;
  - approaches and strategies of intervention;
  - strengths and resources of the training centre.
- Identification of areas of intervention (Appendix 2):
  - activities with group leaders at the training centre (on various themes);
  - education in the classroom (integration of themes into one or more courses);
  - student support services (student life, other services, etc.);
  - diagnosis and anonymous reference to partners (community organizations);
  - professional development of educators at the centre (training activities) etc.

EXPECTED RESULTS

- Report on the needs and expectations of the target populations according to the areas of intervention.

PLANNING ELEMENTS

- One or two separate- or mixed-group meetings of male and female learners, depending on the target population.
- Keep size of groups down to fifteen persons.

USEFUL DOCUMENTS

- Report on Step 1.
- Reference documents on the issues.
LINES OF ACTION

SPECIFIC OBJECTIVES
- To draw up a list of activities.
- To choose activities that are acceptable, achievable and feasible in the training centre.
- To promote partnerships and cooperation internally and with community organizations.

NECESSARY CONDITIONS
- Mobilize educators inside and outside the training centre.

MEANS OF ACHIEVEMENT
- Leadership of a reference group to choose activities according to the areas of intervention established in Step 2 (Appendix 3). Examples of selection criteria:
  - what is acceptable according to the educational approach and focuses of intervention favoured;
  - what is achievable according to the availability of resources (human, material, financial), time and space;
  - what is feasible according to the values under question, the needs of the target populations and their expectations.
- Formation of a committee to carry out trial activities involving internal and external resources.
- Establishment of major priorities (short, medium, and long term).
- Production of a provisional timetable.

EXPECTED RESULTS
- Interim report on the lines of action according to the areas of intervention:
  - list of possible activities according to the areas of intervention;
  - priorities;
  - educational objectives;
  - context;
  - internal and external resources.

PLANNING ELEMENTS
- Hold one or two meetings of reference groups composed of various participants: administrative personnel, specialists, teachers, support staff, adult learners, partners from public, parapublic and community organizations.
- The trial committee may be formed of three to six people, depending on the scope of activities to be organized (Examples: representative of the basic committee, adult learner, teacher or non-teaching professional, outside partner).

USEFUL DOCUMENTS
- Report on previous steps.
- Inventory of instructional and promotional materials.
- Directory of resources (public, parapublic and community organizations).
TRIAL ACTIVITIES

SPECIFIC OBJECTIVES

- To carry out activities that will guide the formulation of a prevention plan.
- To involve internal and external resources in a spirit of partnership.
- To energize the centre.

NECESSARY CONDITIONS

- Follow-up and supervise the preparation and carrying out of activities.
- Progressively animate the school environment by creating interest and stimulating curiosity.
- Secure support of teachers.

MEANS OF ACHIEVEMENT

- Preparation of an activity program (refer to the report on Step 3):
  - sharing of tasks among members of the trial committee;
  - approval of the program by internal and external authorities involved;
  - search for funding sources;
  - organization of activities;
  - promotion of activities.
- Carrying out of the activities.
- Evaluation of the trial activities.

EXPECTED RESULTS

- Report on the trial activities (Appendix 4):
  - description of the activities;
  - procedure;
  - materials produced;
  - participation;
  - evaluation (attainment of objectives, appreciation of participants, committee, etc.);
  - recommendations.

USEFUL DOCUMENTS

- Report on previous steps.
- Inventory of instructional and promotional materials.
- Directory of resources (public, parapublic and community organizations).
- Reference documents on the issues.
- Profile of the target populations.
- Financial aid request forms.
- Examples of memoranda of understanding between partner organizations (according to the extent of activities to be organized).
- Evaluation questionnaire on the trial activities.

PLANNING ELEMENTS

- Any number of people may join the trial committee, depending on the activities to be prepared and directed.
- Subcommittees may be created.
## IMPLEMENTATION OF A PREVENTION PLAN

### SPECIFIC OBJECTIVES
- To equip the adult training centre with an STD/HIV/AIDS prevention plan.
- To sign memoranda of understanding with partner organizations.
- To implement the prevention plan.

### NECESSARY CONDITIONS
- Have the plan approved by the training centre administration and the governing board.
- Inform the training centre’s other departments.

### MEANS OF ACHIEVEMENT
- Draw up an STD/HIV/AIDS prevention plan (Appendix 5):
  - a brief history of the process of implementation;
  - issues and points for discussion;
  - focuses of intervention;
  - principles of action for an educational approach;
  - recommended areas of intervention, list of activities and conditions for success;
  - events calendar (triennial);
  - strategy for integrating the prevention plan into the life of the training centre;
  - directory of internal and external resources;
  - inventory of instructional and promotional materials;
  - bibliography on the subject (books, magazines, Web sites, etc.);
  - memoranda of understanding and partnerships;
  - evaluation procedures and updates to the prevention plan.
- Have the prevention plan approved by the administrative authorities (training centre’s administration office, governing board and general directorship, if applicable).
- Present the prevention plan to various bodies who may be called on inside and outside the training centre.
- Sign the appropriate memoranda of understanding with the partners involved.
- Plan for the organization of the next event.
- Appoint a person to be in charge of the implementation of the prevention plan.
- Draw up a budget (triennial).
- Plan for the training of personnel.

### EXPECTED RESULTS
- Production and approval of an STD/HIV/AIDS prevention plan.

### PLANNING ELEMENTS
- One person may be appointed to be in charge of the implementation of the prevention plan.
- If necessary, this person will recruit assistants.

### USEFUL DOCUMENTS
- Data collected during the process of implementing the prevention plan (Steps 1 to 4).

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### Data collected during the process of implementing the prevention plan (Steps 1 to 4).

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CONCLUSION

Certain points must be considered in undertaking preventive initiatives to reinforce and encourage individual action.

Self-esteem, the inner certainty of one’s own worth, is one of the principal factors in human development. It lies at the heart of any strategy designed to help people take charge of their own lives in order to assume their responsibilities, assert themselves, meet their own needs, choose goals and find the means to attain them, make informed decisions, resist external pressures and finally, to learn when to say yes and when to say no.
Appendixes

APPENDIX 1  Step 1: Foundations of a Process
APPENDIX 2  Step 2: Collection of Information
APPENDIX 3  Step 3: Lines of Action
APPENDIX 4  Step 4: Trial Activities
APPENDIX 5  Step 5: Implementation of a Prevention Plan
APPENDIX 1

STEP 1: Foundations of a Process
Topics for Consideration
- Modes of transmission
- Prevalence
- Incidence
- Risk factors
- Preventive practices
- Scientific progress
- Etc.

The purpose of this activity is to stimulate the expression of ideas and opinions on the prevention of HIV/AIDS and other STDs, while considering the benefits of an educational approach and the potential for success of a prevention plan in the training centre.

If necessary, resource persons from the health sector may be consulted.

Target populations
- Adult learners (men and women)
- Training centre personnel (administrators, specialists, teachers, support staff, etc.)
- Community partners (public, parapublic and community organizations)
- General public

The target populations will influence the scope of the activities to be planned and the types of partnerships to be established.

Useful Documents
- Books
- Magazines
- Web sites
- Promotional brochures
- Educational games

The materials selected will be useful to you throughout the project.

You will contact public, parapublic and community organizations in your locality.

You may order documents at the Ministère de la Santé et des Services sociaux by e-mail at <communications@msss.gouv.qc.ca> or by fax (1-418-644-4574).

You may order documents from the Centre québécois de lutte contre le sida by e-mail at <michel.brosseau@msss.gouv.qc.ca> or by fax (1-514-873-9997).

Documents are also available on the Web site of the MSSS, at the following address: <www.msss.gouv.qc.ca/f/sujets/mtsvihsida.html>.
APPENDIX 2

STEP 2: Collection of Information

PREVENTION OF HIV/AIDS AND OTHER STDs: A GENERAL GUIDE TO IMPLEMENTING A PREVENTION PLAN
Information collected will constitute a bank of ideas that may be classified according to five areas of intervention.

**AREAS OF INTERVENTION**

**Sessions with a group leader at the training centre, focusing on topical themes, such as:**
- Forum: Can the course of the epidemic be changed?
- Debate: Magical thinking
- Quiz game: Games of preventive practices
- Public lecture: Becoming aware of our personal barriers
- Information kiosque: video information, mini-test, handling and distribution of preventive materials
- Noon-hour debate on topical aspects of the subject
- Talk by a person living with AIDS
- Slogan contest
- Humorous theatrical presentation
- Quiz game on the subject
- Rally meeting for community organizations
- Lunch-hour seminar and community supper
- Training centre newspaper
- Radio program
- Discussions and debates on intranet and the Internet
- Promotional materials: mascot, sandwich-board person, posters, distribution of condoms or red ribbons, permanent display rack for information brochures

**Education in the classroom:**
- English Language Arts class: summary of main ideas in a text
- Mathematics class: mathematical and statistical data on the subject
- Geography class: territorial development of the disease
- Science class: medication and progress of scientific research
- Action-research and integration of subjects
- Essay contest on the subject and production of an anthology of texts
- Local course on sexual education or on human relations

**Student support services:**
- Student life
- Student association
- Other internal services

**Testing and actions to direct people toward partners in the community:**
- Public organizations
- Parapublic organizations
- Community organizations

**Professional development for educators at the centre:**
- Identification of needs
- Planning of training activities
APPENDIX 3

STEP 3: Lines of Action
Activities according to the areas of intervention selected

The data classification grid below will help to summarize Steps 2 and 3.

<table>
<thead>
<tr>
<th>Selected area of intervention: ²</th>
<th>LIST OF SELECTED ACTIVITIES (What?)</th>
<th>PRIORITIES³ (When?)</th>
<th>OBJECTIVES⁴ (Why?)</th>
<th>CONTEXT FOR INTERVENTION (Where? When?)</th>
<th>INTERNAL AND EXTERNAL RESOURCE PERSONS (Who?)</th>
</tr>
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</table>

2. Activity with a group leader at the training centre / Training in the classroom / Student support services / Testing and anonymous guidance to partners (community organizations) / Professional development for educators from the centre

3. (S) short term, (M) medium term, (L) long term

4. (E) educate, (I) inform

---

² Activity with a group leader at the training centre / Training in the classroom / Student support services / Testing and anonymous guidance to partners (community organizations) / Professional development for educators from the centre

³ (S) short term, (M) medium term, (L) long term

⁴ (E) educate, (I) inform
APPENDIX 4

STEP 4: Trial Activities
The elements below could form part of an evaluation grid for activities with students and educators from within or outside the training centre.

<table>
<thead>
<tr>
<th>Description of the activity:</th>
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<th>Goals of the activity:</th>
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</table>

1. Have the goals of the activity been attained?

2. What did you gain from this experience?

3. What did the activity make you aware of?

4. What would you need in future to improve your awareness?

5. In your opinion, how have the activities contributed to preventing unsafe attitudes and behaviour and to consolidating safe attitudes and behaviour? Explain your answer briefly.

6. State methods that could facilitate intervention to prevent HIV/AIDS and other STDs.
APPENDIX 5

STEP 5: Implementation of a Prevention Plan
An STD/HIV/AIDS prevention plan could be carried out within a single school year (September to June).

Below is an example of an organizational chart for implementing a prevention plan.

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ADMINISTRATION OF THE TRAINING CENTRE

PERSON IN CHARGE OF THE PROCESS
(Steps 1 to 5)

BASIC COMMITTEE
(Steps 1 to 5)

REFERENCE GROUP
(Step 3)
LINES OF ACTION

TRIAL COMMITTEE
(Step 4)
TRIAL ACTIVITIES

IMPLEMENTATION OF A PREVENTION PLAN
(Step 5)
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