



THE ABCs OF HIV

A workshop developed by the creative folks at
AIDS COMMUNITY CARE MONTREAL



A C C M

This workshop is SHAREWARE.
Copy and distribute freely.

A QUICK INTRO NOTE...

AIDS COMMUNITY CARE MONTREAL

ACCM is a community organisation working primarily in the English language to prevent HIV transmission, to promote community awareness and action, and to enhance the quality of life of people living with HIV/AIDS.

THE DEPARTMENT OF EDUCATION AND PREVENTION

Health is more than the absence of disease ... health is a lifelong commitment to physical and emotional well-being. Being healthy means being aware of risks and making informed choices. Everyone makes decisions about their health, but some choices are harder than others. Our goal in the Department of Education and prevention is to fight discrimination and to provide individuals with the tools to make informed choices about healthy behaviour. We're empowering individuals and communities to take charge of their health.

OUR WORKSHOPS

Our workshops are built by our team of educators, and are available to anyone who wants to integrate HIV, Hepatitis, and Health Promotion activities into their programming. Our workshops include discussions about biology, law, and the social, political, and economic aspects of HIV, as well as sexuality, identity, self-esteem, sexual orientation, assertiveness and sexual autonomy.

Yes, it's SHAREWARE!! You can download, share, interpret, and use sections of our workshops. All that we ask in return is that you mention ACCM when you use our workshops. We also would appreciate any feedback that you have. We want to know what worked for you, and what didn't! We're also available if you have questions about anything in these workshops.

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HOW TO USE THIS WORKSHOP MANUAL

If you have downloaded this workshop, then you have taken a very important step in helping educate members of your community, school or group of friends about the importance of practicing safe sex. ACCM has made this resource available for everyone because we understood how useful it can be to have all the information in one place. This workshop, and others like it, tries to facilitate the transfer of information from you to those around you.

As such, we have tried to make the information as easy to read and decipher as possible. The table of contents outlines for you the different topics, and includes both discussions and activities. The text is split into information for you, the facilitator, and the audience. Whatever is written in normal type is to be presented, while *italic type* helps prompt you, the presenter, as to what should be happening, or gives hints as to how to keep things moving, anything in a box is optional material or activities you can present if time permits.

Any and all of this material can be moved around, elaborated on or removed, depending on time restrictions, age of the audience, or applicability of information being presented. If you don't have all of the materials needed for an activity, remove it from your presentation. Please feel free to manipulate the workshop as you wish, but do keep in mind that all the information is pertinent and relevant to anyone having sex.

One last thing...

When you're doing a presentation on HIV/AIDS, it's important to remember that each group is different. What works well in one group may not apply at all to another. The best thing you, as a facilitator, can do is assess the group you want to present to, and tailor the workshop accordingly. There is a lot of information available to you, so feel free to contact ACCM if you need help sorting through it, or if you have any questions.

Remember, have a good time and keep an open mind....you'll do a great job!!!



MATERIALS REQUIRED FOR THIS WORKSHOP

- ⌘ Something to write on and something to write with
- ⌘ Risk Levels Game – each activity and risk level printed and laminated with magnets on the back (magnets will stick to most black boards)
- ⌘ Evaluation Forms and Post Presentation Form
- ⌘ Pamphlets on HIV and personal experiences of living with the virus
- ⌘ Contact information for your organization and testing sites
- ⌘ Condoms or condom packs (includes condom, lube and contact information) to distribute

INTRODUCTION OF ACCM, FACILITATORS AND WORKSHOP

Introduce the workshop (HIV 101: the basics you need to know in order to make healthy, well informed decisions about you sexual health), the facilitators, the organisation and the different services. If the group is small enough, do a quick round table to get everybody's name.

An example of how we introduce this workshop at ACCM is:

Hi, my name is _____ and I work / volunteer for ACCM. We offer two types of services – support for people who are living with HIV, and education and prevention. Today we will discuss the ABCs of HIV, the basics you need to know to stay healthy, whatever your status.

QUICK INTRO ACTIVITY:

What do people think of when they hear the word “HIV”? Write a minimum of 6 answers on the board or paper. Then discuss why it is that they think these things and whether or not they are myths or facts.

HIV BASICS

WHAT IS HIV?

This question might seem simple, but it is important to have the group answer it. Most people have heard the words HIV and AIDS, but this doesn't mean that they understand what they mean. Depending on your group, and the time you have to do the presentation, you can discuss the definitions of HIV and AIDS in as much detail as possible.

For the following activity it generally works best for you to write the letters (HIV) on the board or on a paper and ask the group what each letter stands for and then why that is important.

H - Human: It only affects humans, and it can affect any human no matter what their sex, race, age or sexuality.

At this point folks may ask about primates or other animals where HIV supposedly originated. This is a tricky question because there are no concrete answers concerning the origins of HIV. At ACCM we choose to address this question saying that there are viruses that are similar to HIV that have been found in primates and felines but they are not the same virus – these viruses can not infect humans and HIV can not infect anything that is not human.

I - Immuno/deficiency: The immune system protects the body against new infections, and fights off the ones we have. When germs get into the body, the immune system intervenes and tries to get rid of them as quickly as possible. There are micro organisms everywhere ... bacteria, fungi, viruses. When we touch objects and then touch our eyes, mouth, or nose, they can get into our body.

An optional quick activity:

How many people have taken public transportation, sneezed, used a public telephone, or held a handrail today? Who has touched their eyes, nose, or mouth, or eaten something without washing their hands? Notice how often this happens and how easily viruses and bacteria can be passed on.

Optional Immune System Information

A simple way to describe what happens in the immune system is to think of it like this group here. It's composed of a number of different components. There is an organizer, or leader. (Point out who's in that position here.) This person responds to what happens and gives directions to the group. The immune system works in much the same way. There are organizer white blood cells that respond when a virus, bacteria, etc. enters the body. They send a signal to other immune cells, which can now find and eliminate the germs. HIV is especially dangerous because it infects these organizer cells, and the system can't respond as effectively to new germs.



V - Virus

HIV is a virus just like other viruses – chicken pox, the flu, cold sore, etc. The difference is that it infects your immune system – the part of your body that should be working against germs. As HIV breaks down the immune system, it becomes harder for your body to defend itself against all sorts of infections. The flu that may last a couple of days for a healthy person can last weeks or even months for someone who's had HIV for a long time.

Optional Biology Details:

When HIV enters the blood, it goes in search of the organizer (CD4/T4) white blood cells. It injects itself inside, and uses the cell's machinery to make thousands of copies of itself until the cell bursts. What happens is your body loses an organizer, and you have many more copies of the virus looking for more organizers. Over time, as your body loses the organizers, the immune system weakens. When a bacteria or virus enters your body, there isn't anything to warn the rest of the immune system, so the bacteria can reproduce and infect your body without being bothered.

Number of people living with HIV:

In Quebec: 1 in 445

In Montreal: 1 in 170

WHAT DOES BEING HIV POSITIVE MEAN?

This section is very important as it permits you to discuss the importance of taking responsibility for your own choices to protect yourself. Many people think that only those who look sick can transmit the virus. Here, you have the chance to address this myth, and remind people that we are each responsible for our own health.

- ⌘ Someone who has HIV is called HIV positive or sero-positive. The virus lives in their body and will continue to do so for the rest of their life.
- ⌘ Being sero-positive simply means that the person has the virus in their body and could, in certain situations, transmit the virus to others.
- ⌘ It does not necessarily mean that the person is suffering from illnesses linked to their condition, it can take a very long time before someone becomes ill as a result of their condition.
- ⌘ There are not necessarily symptoms- a lot of people don't know that they have it. Statistics Canada estimates that 30% of the overall HIV positive population in Canada DO NOT KNOW that they have it.



⌘ A lot of people are afraid of being around people with HIV for fear of getting infected, but in fact, someone with a cold is much more dangerous to a person with a weak immune system. At ACCM for example, there is a policy that when people are sick, they are not allowed to come to work or volunteer, because they are putting everyone else at risk.

WHAT IS AIDS?

Present this segment the same way you did HIV: write the letters (AIDS) on the board or on a paper and ask the group what each letter stands for and then why that is important.

A - Acquired: it's an illness that must come from somewhere, not hereditary (though sometime it can be passed on from mother to child during birth)

I - Immuno-

D - Deficiency: same as is explained above

S – Syndrome: a syndrome is a collection of symptoms

*The most important word here is *Acquired*. Be sure to stress to the group that in order to get AIDS, you must have taken part in a risk activity. It's not who you are, it's what you do that counts.*

WHAT IS THE DIFFERENCE BETWEEN HIV AND AIDS?

- ⌘ HIV is the virus that attacks your immune system; AIDS is the illness that results.
- ⌘ When the immune system has been severely weakened, over time, people can catch diseases that healthy people would never catch. These are called opportunistic infections, and when someone catches one, they are said to have AIDS.
- ⌘ Once someone is infected with the HIV virus, it takes on average 7 to 11 years for to develop AIDS. Treatment can slow down that process considerably.



TREATMENT

NOT THE SAME AS A CURE

Even when having HIV for a long time, people can often live normal, active lives with the medications that now exist for HIV. These treatments work by slowing down the reproduction of the virus. When there are fewer copies of the virus in the body, the immune system has a chance to rebuild itself. However, HIV is always in the body. The medications **DO NOT ELIMINATE** the virus from the body nor would they prevent infection. There are no vaccines available to prevent the infection of HIV either.

THE MEDICATION ITSELF

The treatment medication for HIV is not an easy thing to live with. Some people have to take up to 30 pills a day, at specific times so there is always enough in the bloodstream. Some pills you take with food, some on an empty stomach. Taking medication changes people's lives. A person on medication must schedule their meals around their pills. This can affect social events like birthday celebrations, meals with friends, etc.

Treatment can result in negative side effects for many people, such as:

- nausea / vomiting
- liver problems
- diarrhoea
- headaches
- loss of appetite
- fatigue
- anxiety
- rash

Many people take additional medication to prevent other infections, as well as medication to treat current infections and side effects, and vitamins or herbal supplements. This increases the number of pills taken per day, as well as the possible side effects from the additional medication.

HIV TRANSMISSION

There are many ways to explain how HIV can be transmitted. Try to keep it simple, without mixing up the details. In discussing transmission of HIV, it is very important that the information is given in a clear and precise manner. When people don't understand exactly how HI can be transmitted, it often leads to fear, discrimination, and stigmatization. That's why we try to keep our explanation simple, clear and complete. We feel that this method empowers people to take control over their own bodies and choices by giving them the info they need to assess the risks of transmission in specific situations and to decide whether or not they are prepared to take that risk.

The way that HIV is transmitted can be explained in a very simple manner. Like all virus' HIV needs specific conditions in order to transmit. If the following two conditions are not present it is impossible to transmit the virus:

1. One of the four body fluids that can transmit HIV must be present:

Here you can ask the group if they can name the four fluids that can transmit HIV keeping in mind that the group will probably be suggesting many body fluids that don't transmit HIV (saliva, urine, vomit, etc.). This is normal and important to address. When someone gives you an incorrect answer be sure to thank them because they are probably not the only person with that that thinks that. An Example response is: "In fact, that fluid does not transmit HIV but thank you for your answer because many people think that it does".

<p>Yes – they can transmit</p> <ul style="list-style-type: none"> ⌘ Blood ⌘ Semen / Pre-Cum ⌘ Vaginal Fluid (Pussy juice) ⌘ Breast milk (only for babies) 	<p>Nope – they can't transmit</p> <ul style="list-style-type: none"> ⌘ Saliva, snot, tears, ear wax ⌘ Sweat, vomit ⌘ Urine, feces ⌘ Spinal fluid
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If one of these four body fluids is not present, there is NO RISK.
But just the presence of fluid alone isn't enough...

2. The fluid needs an entry into another person's body

The presence of one of the four fluids that transmits HIV is only the first condition needed in order to transmit the virus, the fluid needs a way to get into the blood stream of a second person. If you're alone, there is no risk. Skin provides a layer of protection against all sorts of germs that you come across everyday, so you can't transmit the virus through healthy skin. High risk activities are vaginal and anal sex without a condom, sharing insertive sex toys, and sharing needles and related equipment.

With out these two conditions can not be transmitted!!!



ASSESSING PERSONAL RISK:

If you don't have time to play the game, which you can find in Appendix ??, you can simply go over the following information and discuss different types of risky activities and how someone can reduce their risks should they chose to (in the Prevention section).

A **HIGH RISK** activity provides one of the fluids with a way inside the body (either directly or through a fragile membrane like the vagina, anus, or penis). These activities are how the vast majority of people catch HIV.

- ⌘ Shared needles bring one person's blood into the bloodstream of a second. This is true whether the needles are used for body art, heroin, coke, or insulin.
- ⌘ The lining of the vagina, penis, and anus are all very fragile, and can be easily irritated by friction, causing tiny tears. Unprotected vaginal or anal sex and sharing penetrative sex toys are all high risk activities for HIV transmission.
- ⌘ An open wound (for example, from a car accident or a fight) can allow one of the fluids to enter the body, although this is uncommon. The wound protects itself by bleeding out of the body and washing away germs, and doesn't let new ones in when it's scabbed over (unless the scab come off with friction).

A **LOW RISK** activity provides one of the fluids with a potential way inside a second person's body (in case the condom breaks or through a stronger membrane like the mouth, nose, eyes, or ears). It is possible to catch HIV, but it doesn't happen very often.

- ⌘ Any part of the body not covered by skin, like your mouth (especially if there are cuts or sores), eyes, nose, etc. can potentially allow an entry for the virus. Oral sex on either a man (semen) or a woman (vaginal fluid) allows one of the four body fluids into the mouth, and is low risk.
- ⌘ Protected vaginal or anal sex poses a risk, but only if the condom breaks or slips off. An intact latex or polyurethane condom will not let HIV pass through it. You can prevent condom breakage by checking the expiration date, pinching the tip to leave space for ejaculation, and adding water or silicone based lubrication to the outside.

There are many activities that have **NO REAL RISK**. This means only one person is involved, none of the fluids are present, or the fluid only comes in contact with healthy skin or an unbroken barrier. HIV transmission is either impossible or has never been shown to happen!

- ⌘ This includes using a barrier (condom or dental dam) for oral sex because the activity was already low risk and there is less chance of breakage.
- ⌘ These risk levels only work for HIV – there are other STIs that can be transmitted through Low or No Real Risk activities. For example, kissing can pass on cold sores, oral sex can transmit chlamydia, rimming can pass on Hepatitis A, fingering could transmit HPV...

The virus **CANNOT** be transmitted through everyday activities.



PREVENTION

HOW TO REDUCE RISKS

High Risk Activities:

Sharing needles: for example tattooing, piercing, injection drugs, steroids, insulin

Reduce the risk by:

- ⌘ Not sharing needles

Unprotected sex

Reduce the risk by:

- ⌘ Use a latex or polyurethane condom with a water-based lubricant or use a female condom (polyurethane) with a water-based lubricant.
- ⌘ NEVER use a condom more than once! Wearing two condoms at the same time is useless: the rubbing will tear the rubber.

Lower Risk Activities:

1) Oral sex on a man

Reduce the risk by: Avoid doing it if you have sores in your mouth, or if you have just seen a dentist
 Use a condom
 Don't brush your teeth or use floss before engaging in oral sex
 Don't let him ejaculate in your mouth (spitting isn't safer than swallowing!)

2) Oral sex on a woman

Reduce the risk by: Avoid doing it if you have sores in your mouth, or if you have just seen a dentist
 Avoid oral sex during menstruation
 Don't brush your teeth or use floss before engaging in oral sex

3) Clearing up the spilt blood of someone who is HIV positive

Reduce the risk by: Using rubber gloves or, failing that, using a plastic barrier between you and the person's blood



GETTING TESTED

HOW CAN YOU TELL IF SOMEONE IS INFECTED WITH HIV?

The only way is to take a blood test, because there are no symptoms.
1/3 of people living with HIV don't know they have it themselves.

You must wait at least 3 months after your most recent possible exposure. This is the time it takes for the anti-bodies to develop in your blood. If you get tested before 3 months, the test will not be accurate.

3 months – 98% effective

6 months – 100% effective

For example, if you put yourself at risk today (Insert today's date) you can't get tested until (add 3 months).

CONFIDENTIAL TESTING

In the province of Quebec, everyone over the age of 14 has the right to confidential medical treatment. This means that all the information you tell your doctor, and all the procedures that you do, cannot be told to anyone else without your permission. You can ask any doctor for an HIV test, and only the two of you should know the result.

ANONYMOUS TESTING

Anonymous testing can be done in two centres in Montreal: CLSC Faubourgs and CLSC Metro. At these clinics, your blood sample is given a number (and possibly a name you make up yourself) and the results don't appear in your file. You don't need to give them a health card, and the test is free.

In order to get the results of your HIV test, you will need to make a second appointment, and all HIV testing should include pre and post counseling.

In Montreal there are two places someone can get anonymous tests:

CLSC Metro - 1801 boul. de Maisonneuve 934-0552

CLSC des Faubourgs - 1705 rue de la Visitation 847-0644



THAT'S ALL FOLKS!

FINAL QUESTIONS AND CONCLUSION

Ask the participants if they have any questions. Answer any questions. Leave them with contact information in case they think of questions later and would like to contact you (you wrote this on the board at the beginning of the workshop.)

Ask the participants to fill out an evaluation form to “let us know what you thought of the workshop”. Tell them to be honest, and that it’s okay if there were things they didn’t like. Tell them not to put their name on it.

If you are distributing condom packs or pamphlets, distribute these at the end, either as they are filling out their form or as they hand in the completed form. Explain what the condom packs are (what is in them) and what information is in the pamphlet(s) you are giving out.

We have included a sample participant evaluation form, as well as a facilitator’s evaluation form to let us know how the workshop went for you.



B) Evaluation**ACCM Workshop evaluation**

Did you learn something new during the workshop? yes no

If so, what did you learn?

Which four body fluids can transmit HIV if they gain access to the bloodstream?

Would you feel more comfortable meeting someone living with HIV after today? yes no

After this workshop, can you see yourself doing anything differently? yes no

If yes, what? If no, why not?

Was the information easy to understand? yes no

Did you feel encouraged to ask questions and participate? yes no

Was the workshop relevant to you? yes no

Why or why not?

What did you enjoy most?

What other topics or information do you think we should cover?

Do you have any other suggestions or comments?

Please tell us about yourself ... Age: _____

Gender: _____



Workshop Evaluation for Facilitators – Please send ACCM your feedback!

Please describe the group you used the workshop with. _____

Did you find the workshop useful? yes no

What did you find most useful? _____

Were the instructions clear? yes no

Was the information easy to understand? yes no

What was your group's response to the workshop? _____

Would you change anything about the workshop? yes no

If yes, what? _____

What other topics or information do you think we should cover? _____

Do you have any other suggestions or comments? _____

Thanks for your feedback! Please fax this form to Education and Prevention at (514) 527-0928.



7) Appendices

A) The Risk Game

This game allows you to use the information you gave the group by getting them to discuss the risks you just outlined, and addressing the subject of stigmatization. Before you begin you will need to print off the following activities, as well as the titles of risk levels.

Explain to the group that certain activities have a higher risk, some have a lower risk, and some have no risk at all. Since you just discussed modes of transmission of HIV, you can revise, as a group, the following definitions and decide whether they are high risk, low risk, or no risk. Make sure that everyone understands the levels before continuing.

High Risk Activities

A body fluid that can transmit HIV has a way inside a second person's body (either directly or through a fragile membrane like the vagina, anus, or penis). These activities are how the vast majority of people catch HIV.

Low Risk Activities

A body fluid that can transmit HIV has a potential way inside a second person's body (in case the barrier breaks or through a stronger membrane like the mouth, nose, eyes, or ears). It is possible to catch HIV, but it doesn't happen very often.

No Real Risk

Only one person is involved, none of the 4 body fluids that can transmit HIV are present, or the body fluid comes in contact with healthy skin or an unbroken barrier. HIV transmission is either impossible or has never been shown to happen!

If you ask this series of questions, you can figure out the risk level of any activity.

(We've combined Health Canada's No and Negligible Risk categories into **No Real Risk**. Activities in both categories have never been shown to transmit HIV, and the two separate categories are confusing to explain in workshops.)

How many people are involved?

- ❖ 1 person = No Real Risk
- ❖ 2 or more people = need to ask the next question

What body fluids are present? Can they transmit HIV?

- ❖ No body fluid = No Real Risk
- ❖ Saliva, mucous (snot), tears, sweat, ear wax, vomit, urine, feces = No Real Risk
- ❖ Blood, semen (including pre-cum), vaginal fluid (including menstrual blood), breast milk = can transmit HIV, so need to ask the next question

Does the body fluid that can transmit HIV have a way inside a second person's body?

- ❖ Contact with healthy skin = No Real Risk because skin provides a solid barrier against viruses. Health Canada also includes skin with minor scratches, hangnails, scabs that are beginning to heal, and fingernails bitten to the quick in this category.
- ❖ Contact with a stronger membrane (usually on the head - mouth, nose, eyes, ears) = Low Risk because they defend themselves and provide a relatively strong barrier against viruses, but it is possible for HIV to get in. There haven't been many cases of HIV transmission reported, but it is possible. Cuts or sores in the mouth make catching HIV through oral sex more likely, but still Low Risk.
- ❖ Using a latex, polyurethane, or vinyl barrier for Low Risk activities brings them down to No Real Risk. The risk was low to begin with, and the barrier is unlikely to break.
- ❖ Contact with a fragile membrane (the genitals – lining of vagina or anus / rectum, fragile skin on penis, urethra) or directly with the blood stream = High Risk because they're less equipped to defend themselves against viruses, especially during the friction that comes with sex. These activities are how the vast majority of people catch HIV.
- ❖ Using a latex or polyurethane condom for High Risk activities brings them down to Low Risk. The only risk is that the condom could break or slip off. Cleaning needles and syringes with water, then bleach, then water reduces your chance of catching HIV (to Low Risk), but will not kill Hepatitis.

Activities with Low or No Real risk of catching HIV may still transmit other STI. Kissing can transmit cold sores, fingering could transmit genital warts (HPV), oral sex can transmit chlamydia, gonorrhea, syphilis, hepatitis B, herpes, and HPV, rimming can transmit hepatitis A and parasites, and vaginal or



anal sex with an intact condom can transmit herpes and HPV if the sores are not covered by the barrier.

Candlelight Diner *(No Real Risk – 1 person)*

Masturbation *(No Real Risk – 1 person)*

Striptease *(No Real Risk – 1 person)*

Reading Erotica / Porn *(No Real Risk – 1 person)*

Phone Sex *(No Real Risk – 1 person)*

Role Playing *(No Real Risk – 1 person)*

Sharing Clothing *(No Real Risk – 1 person)*

Dry Kissing *(No Real Risk – 2 people, but saliva does not transmit HIV)*

French Kissing *(No Real Risk – 2 people, but saliva does not transmit HIV)*

Licking Skin *(No Real Risk – 2 people, but saliva does not transmit HIV)*

Nibbling Ears *(No Real Risk – 2 people, but saliva does not transmit HIV.)*

Biting, no Broken Skin *(No Real Risk – 2 people, but saliva does not transmit HIV)*

Hugging *(No Real Risk – 2 people, but sweat does not transmit HIV)*

Tickling *(No Real Risk – 2 people, but sweat does not transmit HIV)*

Playing Sports *(No Real Risk – 2 people, but sweat does not transmit HIV)*

Dancing Together *(No Real Risk – 2 people, but sweat does not transmit HIV)*

Rubbing Bodies *(No Real Risk – 2 people, but sweat does not transmit HIV)*

Sensual Massage *(No Real Risk – 2 people, but sweat does not transmit HIV)*

Scratching *(No Real Risk – 2 people, but sweat does not transmit HIV)*

Spanking *(No Real Risk – 2 people, but sweat does not transmit HIV)*

Showering Together *(No Real Risk – 2 people, but no fluids exchanged)*

Tying Someone Up *(No Real Risk – 2 people, but no fluids exchanged)*



- Using a Public Toilet (*No Real Risk – 2 people maybe in contact through seat, but urine and feces don't transmit HIV, and the bum skin touching the seat provides a solid barrier*)
- Ejaculation on Skin (*No Real Risk – 2 people, semen present, but healthy skin provides a solid barrier.*)
- Masturbating Someone (*No Real Risk – 2 people, semen present, but healthy skin provides a solid barrier*)
- Fingering Barehanded (*No Real Risk – 2 people, vaginal fluid present, but healthy skin provides a solid barrier*)
- Fingering with a Glove (*No Real Risk – 2 people, vaginal fluid present, but healthy skin already provides a solid barrier and the glove provides an extra barrier in case of cuts*)
- Oral Sex with Latex Dam (*No Real Risk – 2 people, vaginal fluid present, but the latex dam provides a solid barrier that's unlikely to break.*)
- Oral Sex with Condom (*No Real Risk – 2 people, semen or pre-cum present, but the condom provides a solid barrier that's unlikely to break.*)
- Rimming, no Latex Dam (*No Real Risk – 2 people, but feces does not transmit HIV.*)
- Rimming with Latex Dam (*No Real Risk – 2 people, but feces already does not transmit HIV and the latex dam provides an extra barrier against other STI.*)
- Rubbing Vulvas (*No Real Risk – 2 people, vaginal fluid present, but tearing of the vulva and contact with bloodstream is considered to be unlikely by Health Canada.*)
- Sharing Condom Covered Sex Toys (*No Real Risk – if the condom is thrown out after each use, any fluids are thrown out with it, so there is only 1 person in contact*)
- Fisting Barehanded (*No Real Risk – 2 people, vaginal fluid present, but healthy skin provides a solid barrier. NOTE: this activity is likely to cause tears that increase the risk of activities that follow.*)
- Fisting with a Glove (*No Real Risk – 2 people, vaginal fluid present, but healthy skin already provides a solid barrier and the glove provides an extra barrier in case of cuts. NOTE: this activity is likely to cause tears that increase the risk of activities that follow.*)
- New Tattoo Needle (*No Real Risk – 1 person. NOTE: there are other forms of cross contamination, such as sharing ink or ink wells, using unsterilized tubes, not wearing gloves, and not covering switches, the machine, and bottles with new plastic.*)
- Preparing Food (*No Real Risk – 1 person. Even if someone accidentally cuts themselves while preparing food, they will likely throw out anything that comes in contact with blood.*)

Spilled Blood on Skin (*No Real Risk* – 2 people, blood present, but healthy skin provides a solid barrier. *NOTE: It's still a good idea to wear gloves when giving first aid to prevent germs on your skin from getting into an open wound and to prevent any possible risk*)

Oral Sex, no Latex Dam (*Low Risk* – 2 people, vaginal fluid present and in contact with the mouth.)

Oral Sex, no Condom (*Low Risk* – 2 people, semen or pre-cum present and in contact with the mouth.)

Vaginal Sex with Condom (*Low Risk* – 2 people in contact, semen and vaginal fluid present, but the condom provides a barrier. The risk is comes from any genital contact before putting on the condom, or if the condom breaks or slips off.)

Anal Sex with Condom (*Low Risk* – 2 people, semen and possibly blood present, but the condom provides a barrier. The risk is comes from any genital contact before putting on the condom, or if the condom breaks or slips off.)

Sharing Cocaine Straws (*Low Risk* – 2 people in contact through the straw because cocaine dilates blood vessels and makes them burst, blood present and in contact with the nose. The risk may be higher depending on the circumstances.)

Sharing Cleaned Penetrative Sex Toys (*Low Risk* – 2 people in contact through the toy, traces of vaginal fluid or blood could be present after washing and in contact with the lining of the vagina or anus / rectum. Cleaning means boiling or washing with household bleach. Cleaning does not get rid of Hepatitis.)

Sharing Cleaned Needles (*Low Risk* – 2 people in contact through the needle, traces of blood could be present after washing and in direct contact with the bloodstream. Cleaning means rinsing the needle and syringe with sterile water three times, followed by rinsing them with full strength household bleach three times, followed by rinsing them with sterile water three times. None of the liquids should be reused, and both bleach and sterile water can be found at needle exchange sites. Cleaning does not get rid of Hepatitis.)

Vaginal Sex, no Condom (*High Risk* – 2 people, semen and vaginal fluid present and in contact with the lining of the vagina, urethra, and fragile skin on the penis.)

Anal Sex, no Condom (*High Risk* – 2 people, semen and possibly blood present and in contact with the lining of the anus / rectum, urethra, and fragile skin on the penis.)

Sharing Penetrative Sex Toys (*High Risk* – 2 people in contact through the toy, vaginal fluid or blood present and in contact with the lining of the vagina or anus / rectum.)

Sharing Steroid Needles (*High Risk* – 2 people in contact through the needle, blood present and in direct contact with the bloodstream.)



Sharing Piercing Needle (*High Risk – 2 people in contact through the needle, blood present and in direct contact with the bloodstream.*)

Sharing Heroin Works (*High Risk – 2 people in contact through the works, blood present and in direct contact with the bloodstream. Heroin works include the needle, syringe, as well as the spoon and cotton used to prepare the drug.*)

B) Condom use game

Preventing STIs and pregnancy are two important reasons to practice safer sex, including using a condom. If you are sexually active, condoms are still one of the best ways to protect against most STIs and can be used for contraception either alone or along with other methods. Other methods alone (pill, diaphragm, IUD) do not protect against STIs.

Place the 16 steps randomly on the board. Explain that there are 12 real steps and 4 steps that don't actually have anything to do with using condoms properly. Ask the group what they think is the first step. You may have to explain that the first couple of steps happen before the condom even enters the picture. Go through the steps as they identify them in order, asking them about the reasons for each step and making sure the explanations are clear.

The Steps:

It may seem like there's a lot, but it gets faster with practice. If you try this out first when you're alone, you'll be much more comfortable with your partner.

1. Discuss what you're going to do with your partner.

Establish consent, make sure you both want the same thing and that condoms and lube will be available if the activities require them.

2. Play, explore and drive them wild without genital contact.

The penis needs to be hard for the condom to go on, and this gives both partners a chance to get sexually excited, relaxed, and lubricated (if female).

3. Check the expiration date.

Condoms are made of latex, which weakens over time, especially when stored in a hot or sunny place. A condom is much more likely to break after the expiry date or when stored in a wallet for a long time or over a radiator. Ask the group where good places to store your condoms would be – like a knapsack, underwear drawer, under the bed, etc.

4. Don't snag the condom with nails, jewellery or teeth.

Make sure you don't damage the condom while opening the package. A damaged condom may leak or break.

5. Check which way the condom rolls easily so it goes on right side out.

The condom won't roll on well the wrong way. If you start with the wrong side, you have to throw it out since there will be pre-cum on the outside when you turn it around, and this can cause pregnancy and transmit HIV.

6. Add a drop of lube on the inside of the condom.

This increases pleasure for the person wearing the condom, and makes sure that air stays out of the tip when you pinch it.



7. Pinch the tip.

This takes out the air and makes space for the ejaculate in the tip, so the condom is less likely to break when he ejaculates. This is one of the most important steps.

8. Roll the condom all the way down to the base of the penis.

This makes it less likely to slip off during sex.

9. Add lubricant for slippery, sensual s-excitation.

Lube feels better for both partners and decreases the chance of condom breakage. The vagina usually produces lubrication when a woman's sexually excited, but this varies from person to person and throughout her menstrual cycle, and it's always fine to add more. For anal sex, lubrication is essential because the anus has no natural lubrication.

10. Have yourselves a good time, adding some water if the lube dries out.

Water will make water based lube slippery again, and sex is about enjoying yourselves.

11. Guys - pull out before you get limp, holding the base of the condom.

If you pull out while still hard, it makes sure that no semen leaks out inside your partner, and holding the condom makes sure it doesn't come off inside while pulling out.

12. Throw the condom and package into the garbage. Never re-use.

You can't reuse any kind of condom, and throwing things in the trash is just plain polite. Not to mention that condoms have been known to clog toilets...

One last thing – condoms stretch. I can make this one fit over both of my hands. Some guys prefer large condoms for comfort, but unless someone has very specific elephantitis, he'll fit into whatever you have available.

The after step: Bask in the afterglow

Enjoy the good feelings, and you can use this opportunity to talk about what you liked, what you want to do again, and what you'd like to try differently next time. This is also a time to relax and come down from any intense feelings.

