

# Talking with your child about HIV and AIDS

## Background

The global threat posed by HIV and AIDS is redefining childhood. In 2006, more than 530,000 children worldwide were infected with HIV. More than 90 per cent of children with HIV are infected via their mother during pregnancy, labour and delivery, or breastfeeding. Millions more children have been robbed of their parents, their childhood and their education. Those spared a family bereavement still lose teachers, friends, neighbours and role models to AIDS.

In the UK, over 1,200 children and young people under the age of 19 are known to have HIV<sup>1</sup>, and the number of children living in households where one or more members of the family has HIV is estimated to be between 15,000 and 20,000<sup>2</sup>.

Children and young people in the UK are increasingly affected both directly and indirectly by HIV and AIDS, yet remain alarmingly uninformed on the most basic facts about HIV and AIDS, and how to protect themselves.

## The importance of education

As children and young people account for more than half of all new infections worldwide, their education and the prevention of future HIV infections is key to an effective global response to the virus. But education also has another role to play. HIV and AIDS are complex and multi-layered issues – surrounded by

stigma, prejudice and misinformation – which makes it even more important for us to use education to create a safer, fairer and healthier world. It is never too soon to encourage children to care about and help those less fortunate than themselves. However, the nature of information concerning the spread of HIV is sensitive and individual children develop at different rates. Sexual behaviour, drug use, prejudice and death are all large and difficult ideas to embrace, so the adults – either parents or carers – directly responsible for a child's development have a pivotal role to play in this education process.

Children and young people should see the relevance of HIV and AIDS to their lives and be confident enough to ask the questions they need to have answered in order to make informed choices in their own lives. For many, this relevance will be at the onset of puberty. Even if puberty may be a distant event for your child, education about HIV and AIDS from an early age will put them in a better position to ensure that they can take positive action to protect their own health, and to help make life better for those who are already affected.

## UK-based education on HIV and AIDS

Education on HIV and AIDS in the UK varies widely. Some schools choose to cover the

topic in biology lessons, whilst others spend time on issues such as prevention, attitudes and other related issues. There is no requirement for schools to cover the topic so if you feel strongly that it should be on your child's timetable, you will need to voice your concerns directly at your PTA or to the school's governors.

*Hint:* Ask the school how it plans to address the issue of HIV and AIDS and suggest that the school has an assembly or classroom activities for World AIDS Day – 1 December. There is guidance for schools, as well as assembly and classroom activity ideas, on the DfES website: [www.dfes.gov.uk](http://www.dfes.gov.uk)

## Talking with your child about HIV and AIDS

Talking about HIV and AIDS is likely to be a sensitive conversation. Whether you choose to explore the concept of terminal illness or transmission, HIV and AIDS is complex and there may be many potentially awkward aspects to look at. Some parents/carers may be used to discussing topics with their children as a family group, whilst others may tend to use leaflets or television programmes as prompts to have in-depth, one-to-one chats with their child. Each approach has its merits, and this document is simply intended to point you in the direction of information that would make any such approach as fruitful as possible.

A good way to introduce the topic is to ask your child what he or she knows or has heard about HIV and AIDS. Depending on what they've learned already through school, television, the internet, friends or other sources, they may be well-versed or know very little about the subject. For instance, most children between five and eight years of age are just learning about health, sickness and death. They can understand that AIDS is a serious health problem caused by a virus called HIV, and that their chances of getting this virus are low. This may lead to questions about how someone could get HIV, and present a good opportunity in which to explore some of the issues.

We've provided some facts and figures to guide your discussions along with links to where you can find out more information about HIV and AIDS, and how it is affecting children and young people across the world.

### Myth busting

Conflicting information available about HIV and AIDS can sometimes lead to confusion and misunderstanding. There are some common misconceptions about HIV and AIDS that your child may have come across, but talking about the facts of the illness is a good way of calming any fears or anxieties and ensuring that your child has the whole story.

One of the first things you can explore is the difference between HIV and AIDS. Understanding the distinction between living with and managing HIV compared with being ill during the latter stages of AIDS is key to challenging negative attitudes. At present, once a person has HIV, there is no getting rid of the virus. However, anti-retroviral drugs (ARVs) and other medicines to treat opportunistic infections like tuberculosis (TB) mean that people with HIV can stay alive for many years and live completely normal lives – as far as anyone's

life is ever really "normal". Treatment with ARVs can delay the progression from HIV to AIDS, which is the point at which the immune system starts to fail and is less able to fight other infections.

Some people believe that HIV can be transmitted or caught by touching or hugging or sharing a cup with someone with HIV. Here are a few simple facts that address such misconceptions.

- ▶ A person with HIV can look and feel healthy and, given the right medicine, can lead a normal life.
- ▶ You can play with someone who has HIV, just as you can with any of your other friends. This will not make you sick.
- ▶ You can't become infected with HIV from the things you do every day, such as going to school, using a toilet, or drinking from a glass.
- ▶ You can't become infected with HIV by sitting next to someone in school who has HIV or AIDS.
- ▶ You can't be infected by HIV from a kiss on the cheek, or from touching or hugging someone who has the virus.
- ▶ You can't become infected by HIV from a mosquito or any other kind of bug. The virus can't survive inside bugs.
- ▶ You can get HIV either by having unprotected sex with a person who has it, or by sharing drug needles or syringes with an infected person. Also, women with HIV can pass the virus to their babies during pregnancy, labour and delivery, or breastfeeding.

*Hint:* Encourage your child to draw or make a collage about what they know about the subject, then ask them to tell you what the picture represents. You can then talk through each point

and clarify any areas of misunderstanding. There is no such thing as a silly question and it is reasonable that they may have misunderstandings about HIV and AIDS. Whatever their level of knowledge, praise their interest in the topic and impress on them the importance of knowing the facts.

### THE FACTS

#### What is HIV? What is AIDS?

AIDS (Acquired Immune Deficiency Syndrome) is one of the most serious illnesses in the world today. It is caused by a virus called HIV (Human Immunodeficiency Virus), which can be transferred from person to person via contact with infected body fluids, such as blood or breast milk. Most but not all people become infected through unprotected sex, injecting drugs, or via their mother during pregnancy, labour and delivery, or breastfeeding.

People who have HIV can stay healthy and live a normal life but without the right medical help, HIV can slowly destroy the immune system – the body's way of healing itself. When HIV has caused someone to become so weak that their body can't heal itself any more, a person is said to have AIDS. When this happens, a person can easily catch illnesses like pneumonia or TB. Without the right medical care, they are likely to become very ill and die. In the UK, because we have a modern health service, it is incredibly unlikely that a child would be born with HIV. It is also extremely rare for a child's parents to die because of AIDS.

#### How can HIV be treated?

Anti-retroviral medicine (ARVs) is the only effective way to treat HIV. They work by blocking the action of HIV and have succeeded in transforming the virus from a death sentence into a chronic but relatively stable condition. ARVs and other medicines to treat opportunistic infections like TB and pneumonia

can help keep children and adults with HIV alive for many years. Today, the possibility of obtaining treatment for HIV-related illness brings hope and draws people to health care services. However, the high cost of medicine prices them out of the reach of many people with HIV, especially in developing countries.

### How do babies get infected with HIV?

Every minute of every day, a child dies of AIDS-related illness and another child becomes infected with HIV. While adolescents become infected with HIV primarily through unprotected sex or injecting drugs, babies are primarily infected through their mothers. Without preventive intervention, about one in four babies born to mothers with HIV will be infected with the virus.

### Can mother-to-child transmission of HIV be prevented?

Yes, it can. In developed countries, due to the use of ARVs, combined with elective Caesarean delivery and avoidance of all breastfeeding, new infections in babies have been reduced to almost zero. But in developing countries, less than 10 per cent of pregnant women with HIV have access to services to prevent the transmission of the virus to their babies, and less than 5 per cent receive those health services.

### Why are girls more at risk than boys?

Worldwide, adolescent girls and young women now make up 60 per cent of 15–24 year-olds with HIV. In sub-Saharan Africa, adolescent girls and young women are particularly disempowered; with as many as four infected young women to every infected young man. For many impoverished girls and young women, exchanging sex for money, food or other benefits may be the only way to make a living or support their families. Poverty and cultural norms in many regions, notably

South Asia and sub-Saharan Africa, mean that a significant percentage of girls are married before the age of 18. Marriage provides no protection from HIV. Married women may be subject to domestic violence or sexual abuse, even within their own families. They may have little or no power or ability to negotiate the conditions of sexual intercourse.

### Why don't children infected with HIV have the same access to treatment as adults?

More than 20 years since HIV was first diagnosed, help is reaching less than 10 per cent of children affected by the disease. ARVs that are appropriate for children are not easily available. Current paediatric formulations are expensive compared to adult formulas and existing formulations are not packaged in child-friendly doses. UNICEF and its partners are working to improve the treatment prospects of affected children.

### What happens to children with HIV who do not receive medical treatment?

Once a person has HIV, there is no cure. The progression of the virus is very aggressive in children. Without preventive interventions, at least 25 per cent of newborns with HIV die before their first birthday and most die before they reach the age of two. Most succumb to opportunistic infections, such as pneumonia, due to the inability of their immune systems to combat this type of infection. Up to half of all deaths of children under the age of five in the hardest-hit countries are due to AIDS-related causes. AIDS is rapidly catching up with measles, malaria and diarrhoea as one of the greatest causes of death among children.

### Sexual health education in schools

Young people need to be provided with relevant information about HIV prevention, both in and out of school. Education that gives young people life-skills to make

the right choices needs to cover both factual sex education and the idea of risk. It should enable young people to think critically, negotiate, resolve conflicts and communicate clearly to minimize the risk of infection. Evidence shows that early sexual health education does not encourage increased sexual activity. On the contrary, young people who have received comprehensive correct sexual health information at an early age begin to have sex at a later age and are more inclined to practise safe behaviour when they do have sex.

### Shouldn't these kinds of issues be left to the parents?

HIV and AIDS affects entire communities and entire nations, but entrenched stigma around the issue continues to prevent open discussion at all levels of society, including within families. We all have a part to play. Parents need encouragement and support to discuss HIV and AIDS with their children, but often lack the necessary information and services to guide them. Young people themselves also have a pivotal role as peer educators. Overall awareness of HIV and AIDS must be raised and an end drawn to the silence on this issue, encouraging open debate in every home.

### Further information

Unite for Children, Unite against AIDS [www.unicef.org.uk/aids](http://www.unicef.org.uk/aids)  
UNICEF Youth Voice [www.unicef.org.uk/youthvoice](http://www.unicef.org.uk/youthvoice)  
UNAIDS [www.unaids.org](http://www.unaids.org)  
Avert [www.avert.org](http://www.avert.org)  
AIDS map [www.aidsmap.com](http://www.aidsmap.com)  
HIV/AIDS Alliance [www.aidsalliance.org](http://www.aidsalliance.org)  
National AIDS Trust [www.nat.org.uk](http://www.nat.org.uk)

UNICEF cannot accept responsibility for the content of external websites.

### References:

- <sup>1</sup> *National Study of HIV in Pregnancy and Childhood Quarterly Update* No. 66, April 2006
- <sup>2</sup> Conway, M (2006) *Developing support services for children, young people and families living with HIV: A handbook for service providers*. London: National Children's Bureau