INFORMATION BOOKLET

LEARNING TO COPE WITH HIV/AIDS

THE TRAUMA CENTRE
FOR SURVIVORS OF VIOLENCE AND TORTURE
Learning objectives

1. To learn about HIV/AIDS
2. To understand the treatment for HIV/AIDS
3. To understand the linkage between HIV/AIDS and other chronic illnesses
4. To understand the linkage between HIV/AIDS and gender-based violence
5. To learn about a healthy lifestyle
6. To know where to receive support

I CAN, I WILL, I MUST MAKE A DIFFERENCE IN A WOUNDED WORLD
WHERE PEOPLE STIGMATISE THOSE WITH HIV/AIDS
### A glossary of useful terms

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td><strong>Acquired Immunodeficiency Syndrome (AIDS)</strong></td>
<td>A disease of the immune system due to infection with HIV. HIV destroys the CD4 T lymphocytes (CD4 cells) of the immune system, leaving the body vulnerable to life-threatening infections and cancers. Acquired immunodeficiency syndrome (AIDS) is the most advanced stage of HIV infection. To be diagnosed with AIDS, a person with HIV must have an AIDS-defining condition or have a CD4 count less than 200 cells/mm³ (regardless of whether the person has an AIDS-defining condition).</td>
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<tr>
<td><strong>Adherence</strong></td>
<td>Taking medications (or other treatment) exactly as instructed by a health care provider. The benefits of strict adherence to an HIV regimen include sustained viral suppression, reduced risk of drug resistance, improved overall health and quality of life, and decreased risk of HIV transmission</td>
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<tr>
<td><strong>Antiretroviral Therapy (ART)</strong></td>
<td>The daily use of a combination of HIV medicines (called an HIV regimen) to treat HIV infection. A person’s initial HIV regimen generally includes three antiretroviral (ARV) drugs from at least two different HIV drug classes.</td>
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<td><strong>CD4 T Lymphocyte</strong></td>
<td>A type of lymphocyte. CD4 T lymphocytes (CD4 cells) help coordinate the immune response by stimulating other immune cells, such as macrophages, B lymphocytes (B cells), and CD8 T lymphocytes (CD8 cells), to fight infection. HIV weakens the immune system by destroying CD4 cells.</td>
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<td><strong>Condom</strong></td>
<td>A product used during sex (including vaginal, anal, or oral sex) to prevent the transmission of sexually transmitted diseases, such as HIV, and/or the likelihood of pregnancy. The male condom is a thin cover that fits over a man's erect penis. The female condom is a nitrile pouch that fits inside the vagina.</td>
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<td>HIV</td>
<td>The virus that causes AIDS. AIDS is the most advanced stage of HIV infection. HIV is transmitted through direct contact with HIV-infected body fluids, such as blood, semen, and vaginal fluids, or from a mother who has HIV to her child during pregnancy, delivery, or breastfeeding (through breast milk).</td>
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<td>Immune</td>
<td>A complex network of specialized cells, tissues, and organs that recognize and defend the body from foreign substances, primarily disease-causing microorganisms such as bacteria, viruses, parasites, and fungi.</td>
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<td>Post-Exposure Prophylaxis (PEP)</td>
<td>Short-term treatment started as soon as possible after high-risk exposure to an infectious agent, such as HIV. The purpose of post-exposure prophylaxis (PEP) is to reduce the risk of infection.</td>
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<td>Pre-Exposure Prophylaxis (PrEP)</td>
<td>An HIV prevention method for people who are HIV negative and at high risk of HIV infection. Pre-exposure prophylaxis (PrEP) involves taking a specific combination of HIV medicines daily. PrEP is even more effective when it is combined with condoms and other prevention tools.</td>
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<td>Sexually Transmitted Disease (STD)</td>
<td>Synonym(s): Sexually Transmitted Infection (STI) An infectious disease that spreads from person to person during sexual contact. Sexually transmitted diseases, such as syphilis, trichomoniasis, and HIV infection are caused by bacteria, parasites, and viruses</td>
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<td>Tuberculosis (TB)</td>
<td>An infection caused by the bacteria Mycobacterium tuberculosis and Mycobacterium bovis. Tuberculosis (TB) is spread when a person with an active infection (TB disease) coughs, sneezes, speaks, or sings, and then a person nearby breathes in the bacteria. TB usually affects the lungs, but it can also affect other parts of the body, such as the kidneys, spine, and brain. There are two forms of TB: latent TB infection and TB disease. In people with HIV, TB is considered an AIDS-defining condition</td>
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HIV and AIDS: What’s the difference?

HIV
- HIV is the virus that causes HIV infection.
- HIV damages the immune system by killing CD4 cells.

AIDS
- AIDS is the last stage of HIV infection.
- As HIV infection advances to AIDS, the amount of HIV in the body increases and the number of CD4 cells decreases.
- HIV medicines can stop HIV infection from progressing to AIDS.
- Without HIV medicines, HIV advances to AIDS in about 10 to 12 years.

CD4 Cells
- CD4 cells are part of the immune system.
- HIV attacks and kills CD4 cells.
- Loss of CD4 cells makes it hard for the body to fight off infections.

For more information, visit: aidsinfo.nih.gov
How is HIV/AIDS SPREAD?

- Semen
- Vaginal fluids
- Blood
- Breast milk
- Pre seminal fluid
- Rectal fluids

Mother-to child transmission during
Pregnancy, childbirth and feeding

How HIV/AIDS transmitted?

- Vaginal Sex
- Anal Sex
- Oral Sex
- Multiple Sex Partner
- Sharing Needle
- Pregnancy
- Breastfeeding
- Blood Transfusion
- Bitten
- Organ Transplantation
- Wound Contacts
- Deep Kissing
- Occupational Exposure
Is HIV Curable?

- Not curable yet
- But it is treatable
ANTIRETROVIRAL THERAPY (ART)

ART is Antiretroviral Therapy which is the combination of ARV’s used to treat people with HIV and AIDS. And is free at any clinic or hospital. Antiretrovirals (ARV’s) are the medicines used to treat people living with HIV and AIDS. ART does not cure HIV but help people live longer, healthier lives. The medicine, ARV’s must be taken at the same time every day. When ART is taken correctly the amount of HIV in their blood (viral load) can drop to almost undetectable levels and reduce the spread of HIV transmission.

ADHERENCE

Medication adherence means sticking firmly to an HIV regimen of taking HIV medicines every day and exactly as prescribed.
TIPS FOR TAKING YOUR HIV MEDS, ON TIME, ALL THE TIME

ONE DAY, TWO FRIENDS MET IN A COFFEE SHOP...

HEM ARK, MY DOCTOR SAYS I NEED TO BE BETTER ABOUT STICKING TO MY HIV REGIMEN. HOW DO YOU DO IT?

DO YOU USE A PILL BOX?

IT HELPS ME KEEP TRACK OF THE MEDICINE I NEED TO TAKE THAT DARN

SMTW FES

YEAH, I USE A PILL BOX, BUT I STILL HAVE TROUBLE REMEMBERING TO TAKE MY MEDS.

WELL, THERE ARE SOME OTHER THINGS YOU COULD TRY!

KEEP YOUR HIV MEDICATIONS WHERE YOU'LL NOTICE THEM, BUT OUT OF THE REACH OF CHILDREN.

MAKE TAKING YOUR MEDICATIONS PART OF YOUR DAILY ROUTINE. FOR EXAMPLE, TAKE YOUR MEDICATIONS AFTER YOU BRUSH YOUR TEETH EVERY MORNING.

DON'T RUN OUT OF YOUR MEDICATIONS. REFILL YOUR PRESCRIPTION WHEN YOUR SUPPLY GETS LOW.

SET AN ALARM ON YOUR PHONE. I USE THE AIDSinfo DRUG APP.

ASK A FRIEND OR FAMILY MEMBER TO REMIND YOU.

HEY DID YOU TAKE YOUR MEDS TODAY?

THAT'S FINE WHEN I'M AT HOME -- BUT WHAT HAPPENS WHEN I HAVE TO WORK LATE OR MY SCHEDULE CHANGES?

KEEP A BACK-UP SUPPLY OF YOUR MEDICINE IN YOUR BAG OR AT WORK, SO YOU CAN TAKE YOUR PILLS WHEREVER YOU ARE, AND WHEN YOU TRAVEL, BRING MORE MEDICINE THAN YOU THINK YOU'LL NEED IN CASE YOUR PLANS CHANGE.

REMEMBER TO KEEP ALL YOUR APPOINTMENTS WITH YOUR DOCTOR.

IF YOU'RE REALLY STRUGGLING, YOUR DOCTOR CAN GIVE YOU SOME MORE TIPS ON HOW TO STICK TO YOUR HIV REGIMEN. JUST ASK!

FOR MORE INFORMATION ON ADHERENCE, GO TO AIDSinfo.
PRE-EXPOSURE PROPHYLAXIS

The word “prophylaxis” means to prevent or protect from an infection or disease. Pre-exposure prophylaxis (PrEP) can help prevent HIV infection in people who don’t have HIV but who are at high risk of becoming infected with HIV. PrEP involves taking an HIV medicine called Truvada every day. Truvada contains two HIV medicines (tenofovir disoproxil fumarate and emtricitabine) combined in one pill. If a person is exposed to HIV, having the PrEP medicine in the bloodstream can stop HIV from taking hold and spreading throughout the body.

POST-EXPOSURE PROPHYLAXIS

PEP stands for “post-exposure prophylaxis.” PEP involves taking HIV medicines within 72 hours after a possible exposure to HIV to prevent becoming infected with HIV. PEP should be used only in emergency situations, e.g. rape victims or health workers with needle-stick injuries. It is not meant for regular use by people who may be exposed to HIV frequently. PEP is not intended to replace regular use of other HIV prevention methods, such as consistent use of condoms during sex or pre-exposure prophylaxis (PrEP).
**PrEP vs. PEP**

PrEP and PEP are methods for preventing HIV infection that involve taking HIV medicines. When you take steps to protect yourself against a disease, like HIV, it’s called prophylaxis.

PrEP and PEP are for people who don’t have HIV, but are at risk of getting it.

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<th>PrEP stands for pre-exposure prophylaxis.</th>
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### Before HIV exposure.

PrEP is taken every day, before possible exposure.

### After HIV exposure.

In emergency situations, PEP is taken within 72 hours (3 days) after possible exposure.

### Who’s it for?

- **PrEP** is for people who don’t have HIV and:
  - have a sex partner with HIV
  - have sex with people whose HIV status is unknown
  - share injection drug equipment

- **PEP** is for people who don’t have HIV but may have been exposed:
  - during sex
  - at work through a needlestick or other injury
  - by sharing injection drug equipment
  - during a sexual assault

### How effective is it?

- **PrEP** can reduce the risk of getting HIV from sex by more than 90% and from injection drug use by more than 70%.

- **PEP** can prevent HIV infection when taken correctly, but it is not always effective. Start PEP as soon as possible to give it the best chance of working.

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**Talk to your health care provider about whether a prescription for PrEP or PEP is right for you.**
SEXUALLY TRANSMITTED INFECTIONS (STIs)

STD stands for sexually transmitted disease. Sometimes STDs are called sexually transmitted infections (STIs). STDs are infections that spread from person to person through sexual contact, including anal, vaginal, or oral sex. STD/STIs are caused by bacteria, parasites, and viruses. Behaviours that put people at risk for HIV also increase their risk for infection with other STD/STI’S.

These risky behaviours include the following:

- Having anal, vaginal, or oral sex without a condom.
- Having sex with many partners, especially anonymous partners.
- Having sex while using drugs or alcohol. Using drugs and alcohol affects the brain, which can lead to poor decisions and risky behaviours.

Having an STD/STI can make it easier to get HIV. For example, an STD/STI can cause a sore or a break in the skin, which can make it easier for HIV to enter the body. Having HIV and another STD/STI may increase the risk of HIV transmission.
WHAT ARE THE SYMPTOMS OF STD/STIs?

Symptoms of STD/STIs may be different depending on the STD/STI, and men and women with the same STD/STI can have different symptoms. Examples of possible STD/STI symptoms include painful urination (peeing), unusual discharge from the vagina or penis, and fever. Some STD/STIs may not cause any symptoms. Even if a person has no symptoms from an STD/STI, it is still possible to pass the STD/STI on to other people.

Know the Signs:

- Painful urination
- Unusual discharge
- fever
WHAT IS THE TREATMENT FOR STD/STIs?

STDs caused by bacteria or parasites can be treated with antibiotics. There’s no cure for STDs caused by viruses, but treatment can relieve symptoms and help keep the STD under control. Untreated STDs may lead to serious complications. For example, untreated gonorrhoea in women can cause problems with pregnancy and infertility. Untreated HIV will eventually advance to AIDS and cause death.
Tuberculosis (TB) is a disease caused by bacteria that spread in the air. TB can spread from person to person. TB usually affects the lungs, but TB-causing bacteria can attack any part of the body, including the kidneys, spine, or brain. If not treated, TB disease can cause death. HIV weakens the immune system increasing the risk of TB in people with HIV. People who have both HIV and TB should be treated for both diseases; however, when to start treatment and what medicines to take depends on a person’s individual circumstances.
SIGNS AND SYMPTOMS OF ACTIVE TB

- Coughing that lasts three or more weeks
- Chest pain, or pain with breathing or coughing
- Coughing up blood
- Loss of appetite
- Fever
- Night sweats
- Fatigue
- Unintentional weight loss
- Chills
NUTRITION

Poor Nutrition
resulting in weight loss, muscle wasting, weakness, nutrient deficiencies

Increased Nutritional needs
Reduced food intake and increased loss of nutrients

HIV

Impaired immune system
Poor ability to fight HIV and other infections, Increased oxidative stress

Increased vulnerability to infections
E.g. Enteric infections, flu, TB hence Increased HIV replication, Hastened disease progression, Increased morbidity

How can I stay healthy with HIV?

Take antiretroviral treatment every day, as prescribed
Stay in touch with my doctor and follow their advice

Eat a balanced and nutritious diet
Exercise and keep fit
Ask for support from friends, family and others with HIV
The Linkage between Gender Based Violence (GBV) and HIV/AIDS

Violence against women and girls takes many forms such as sexual, verbal, economic, psychological and physical. Sexual violence can lead to HIV infections. For example, the impact of a gang rape, marital rape and other contexts within which sexual violence occurs. Having multiple partners can also lead to HIV/AIDS infections. Even in an intimate partner relationship, HIV/AIDS infection is possible especially when one partner is cheating on the other.

Did you know?

- SA bears 18% of the global burden of HIV infection and yet is home to <1% of the world’s population.
- Four out of the five districts in SA that have an HIV prevalence of >40% among pregnant women are in KwaZulu-Natal Province. The remaining seven districts in KwaZulu-Natal have HIV prevalence rates ranging between 33.7% and 40.0% among pregnant women, compared with the overall prevalence of 30% in SA.
- Young women between the ages of 15 and 24 years have up to six times more HIV infection than their male peers, and are experiencing the highest death rates.
- Men and women who have experienced GBV are more likely to have behaviours that increase their risk of acquiring HIV infection.
- Compared with an HIV-negative woman, a woman who discloses her HIV-positive status to a partner of unknown HIV status is more likely to experience physical and emotional abuse.
Referral

Both gender-based violence and HIV/AIDS survivors need trauma counselling, medical treatment and legal support. Often people are reluctant to seek help because they afraid of rejection, the stigma attached to HIV/AIDS and counselling, but also due to fear of the perpetrator. It is important to ask the social worker or health worker to refer you for the appropriate service.
THE TRAUMA CENTRE: WHO WE ARE

We provide support to survivors of violence and torture, who may be experiencing some of the traumatic responses outlined in this booklet. We offer counselling, legal assistance, support groups and workshops, amongst other services.

CONTACT US

If you, or someone you know, need assistance related to trauma and violence, please get in touch with us.

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