The difference between **HIV** and **AIDS**
**Objective:** To create an understanding of the difference between HIV and AIDS.

**HIV**

1. HIV is a virus.
2. HIV has no symptoms.
3. An HIV positive person who does not yet have AIDS may feel and look perfectly healthy.
4. An HIV positive person who does not have AIDS may have an active and effective immune system.
5. An HIV positive person who does not have AIDS can work and support his or her family.

**AIDS**

1. AIDS is a disease.
2. A person with AIDS may have the symptoms of various diseases which he has acquired, such as TB, meningitis and cancer.
3. A person with AIDS may be weak, and thin. He or she may feel and look sick.
4. The immune system of a person with AIDS is rapidly growing less and less effective at protecting his or her body.

As an HIV positive person begins to develop AIDS, more and more Helper T4 Cells (green in picture) begin to manufacture HIV (red in picture). This photograph shows HIV particles breaking out of the surface of a Helper T4 Cell.

**GUIDELINES**

1. **Ask:** How long does it take for a person with HIV to develop AIDS? Let participants share their learning from earlier discussion guides.
2. **Ask:** Does a person with HIV have AIDS? Allow three or four participants to share their perceptions.
3. **Ask:** What is the difference between HIV and AIDS? As participants express their views, list the differences on a flip chart sheet, in two columns titled HIV and AIDS. The list may have some or all of the points shown alongside.
4. **Explain:** One big difference between HIV and AIDS is that one is a virus, and the other is a condition. A person with HIV may or may not have AIDS. However, a person with AIDS will always have HIV in the blood.
What can an HIV positive person do to improve his or her chances of delaying AIDS?

**Objective:** To create an understanding of the importance of nutrition in delaying the onset of AIDS.

**Guidelines**

1. Ask: What can an HIV positive person do to improve his or her chances of delaying AIDS? Let participants express their views and list them on a flip chart sheet.

2. Explain: Many studies have shown that HIV positive people who are malnourished are likely to get sick more often, develop AIDS earlier, and die earlier than those who pay attention to their nutrition needs and eat a balanced diet.

There is some conflicting advice on how people with HIV should eat, and even more discussion about what nutrients they should supplement. The best course for an infected person is to get information from many sources, talk to others who are living positively with HIV, and consult a doctor before deciding what is the best diet for him or her.
What kind of infections does a person get as HIV begins leading to AIDS?

**Objective:** To create an understanding of opportunistic infections.

**GUIDELINES**

1. **Ask:** What kind of infections does a person get as HIV begins leading to AIDS? Allow participants to name some infections that they know about, and list them on a flip chart sheet.

2. **Explain:** We are surrounded by disease-causing bacteria, viruses, fungi, and other germs. Some of them even exist within our bodies without causing any illness. For example, many people carry the latent TB germ in their bodies. However, these germs will not be successful in causing a disease in a person with a healthy immune system. It is only when the immune system is weakened by malnutrition, illness, or a condition like HIV infection, that these germs find an opportunity to cause a disease. Such infections are called opportunistic infections.

Some opportunistic infections (OIs) that may appear as HIV progresses to AIDS include:

- Gastroenteritis (a digestive illness)
- Encephalitis (an inflammation in the brain)
- Candidiasis (or thrush, a fungal infection of the mouth or vagina)
- Meningitis
- Pneumonia
- Herpes
- Kaposi’s sarcoma (a kind of skin cancer)
- Tuberculosis
When HIV leads to AIDS

After years of living normally with HIV, a person will start developing AIDS, as the immune system begins to weaken. At this stage, the person will become vulnerable to various Opportunistic Infections, which can attack any part of the body. Such infections could range from fungal infections and colds to diseases like TB or cancer. Though the person is HIV positive, these conditions can be treated and sometimes cured, though eventually the person will die.
**Objective:** To create an understanding of Highly Active Anti-Retroviral Therapy (HAART).

**GUIDELINES**

1. **Ask:** Are there any medicines that can help an HIV positive person to delay AIDS? Explore participants’ perceptions of available treatments.

2. **Explain:** Highly Active Anti-Retroviral Therapy (HAART), consisting of combinations of three or more Anti-Retroviral (ARV) drugs, reduces the numbers of HIV in the blood by inhibiting their ability to multiply, though these drugs cannot eliminate it.

3. **Explain:** Before deciding to go for HAART, a person should thoroughly understand the following aspects about the treatment:

   **Adherence:** Taking the pills exactly as prescribed is vital. Skipping only a few doses can trigger the development of new mutations of HIV that are resistant to these drugs. These new strains could eventually lead to the person’s death.

   **Costs:** In recent times, the cost of HAART has come down, and in some places in Kenya it is even free. Whether it is free, or has a nominal cost, the patient must remember that discontinuing treatment could lead to resistant strains of HIV developing in that person, causing earlier death.

   **Side effects:** These medicines can cause some serious side effects – fever, rash, nausea, dizziness, baldness, diarrhea, p aunch development, a buffalo-like hump between the shoulders, and diabetes — to name a few.

4. **Explain:** HAART drugs do not and can not cure HIV. They can only help delay the onset of AIDS, or help delay death from AIDS.
The AIDS Walk

INSTRUCTIONS: Use a volunteer to role-play an uninfected person, and role play an HIV positive person yourself. Using the illustration on this page as a guide, show how an HIV positive person may have an even better chance of surviving than an uninfected one because he or she takes much better care of himself or herself.

- Not HIV positive
  - Gets cold with fever
  - Recovers from cold without medication. Eats poorly, smokes, drinks, has casual sexual intercourse without condoms

- HIV positive
  - Gets cold with fever
  - Develops serious cough with bloody sputum, delays diagnosis
  - Starts treatment for TB too late; dies of TB

- Dies of AIDS
  - Develops pneumonia. Does not respond to drugs
  - Develops candidiasis (opportunistic infection)
  - Undergoes treatment for TB, recovers completely. Starts anti-retrovirals

- Does not HIV positive
  - Develops serious cough with bloody sputum, diagnosed as TB
  - Takes immediate medication, recovers from cold. Exercises daily, eats balanced and nutritious meals, maintains a positive outlook
  - Dies of AIDS
  - Starts treatment for TB too late; dies of TB

The difference between HIV and AIDS
Since HIV is different from AIDS, what is the best way to refer to the disease?

**Objective:** To help participants understand why HIV and AIDS should not be joined together into a single term, HIV/AIDS.

**GUIDELINES**

1. **Ask:** Is it better to refer to this disease as HIV/AIDS or simply AIDS? Allow participants to express their views, and use the discussion to explore how well people have understood the difference between HIV and AIDS. Challenge their perceptions with the following points and questions:
   - When we know that HIV is different from AIDS, why should we join the two words and make it sound like they were one?
   - By joining HIV and AIDS into one word, will we not be strengthening the perception that HIV is the same as AIDS?
   - In English, the '/' character is pronounced as *slash* or *stroke*. Thus ‘HIV/AIDS’ may be read as HIV slash AIDS, or HIV stroke AIDS. How is the '/' character pronounced in Kiswahili?
   - Why do you think it was decided that the disease should be called ‘HIV/AIDS’? What could be the advantages?

2. **Explain:** HIV and AIDS might have been joined together in the early days of the epidemic to help people understand that the HIV virus leads to a disease called AIDS. However, in today’s Kenya, with high awareness of the epidemic, joining HIV and AIDS makes it difficult for people to understand that there is a deep difference between HIV and AIDS.

When a person tests positive, he does not have HIV/AIDS. He has only HIV.

AIDS cannot be prevented; only HIV can be prevented. AIDS can be mitigated or controlled to some extent with certain drugs. Saying “HIV/AIDS Prevention” has no meaning.

3. **Suggest** that a person should be careful to use HIV when referring to the infection, and AIDS when referring to the disease. For example, “HIV Prevention and AIDS Control”.

Under no circumstances should the term ‘HIV/AIDS’ be used.