



JEKO'S PACIFIC TALES

The ABCDs of HIV/AIDS

Robyn Drysdale - Jipé Le-Bars





This teaching story was developed for community leaders and teachers. It is to be used for group discussions on HIV/AIDS & safe sex at community level.

Feel free to use, photocopy, colour or redraw the illustrations. You can also try to develop new legends and dialogs for Jeko.

The information on pages 19 to 40 is more detailed. It is not part of the story but is provided as a background resource for community leaders and teachers to help them lead group discussion.

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HIV/AIDS and other sexually transmitted infections (STIs) are growing problems in the Pacific

- There have been more than 10,000 HIV infections in the Pacific and infections are increasing.
- There are high rates of other STIs in the Pacific.



Anyone can get HIV/AIDS

- You can't tell by looking at someone whether or not they have HIV.
- A person with HIV may not know that they have the virus, but they can still pass it on.







You can get information on HIV/AIDS from your local health clinic, health centre, from health workers and also from youth centres and community organisations, from peer educators and community workers.



HIV is the virus that can lead to AIDS.

HIV is a virus that damages a person's immune system. The immune system is the part of the body that protects us from getting sick and helps us get better when we are sick.

With a weakened immune system, a person with HIV can easily catch other germs. Their body can't fight the germs and they get very sick (this is called AIDS).







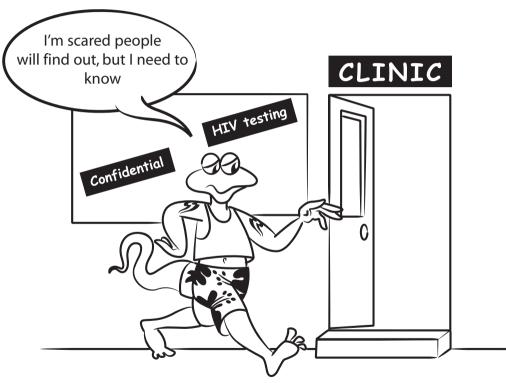
HIV can live in a person's body for years before they get sick but you can still pass it on even if you seem

The only way to know for sure if you have HIV (the virus that causes AIDS) is to have a blood test.

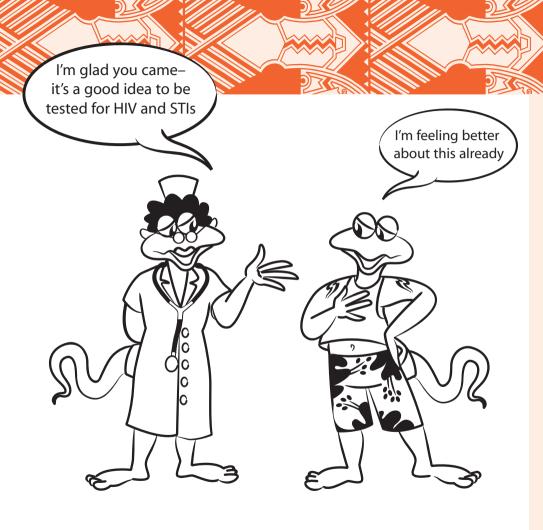


You will need to go to a clinic for a test.

- Testing for HIV is voluntary (it's your decision)
- All information is confidential
- There is counselling available to support you getting tested







If you are sexually active it's important to have a sexual health check regularly.

Testing is important because if you do have HIV it's better to find out early, so that you can get treatment and support. It's also important to test for other STIs because most of these can be easily treated and cured (gonorrhoea, chlamydia, syphilis, trichomoniasis).

You can also get more information about HIV & other STIs and how to protect yourself while you're there.



HIV TRANSMISSION

The HIV virus lives in semen, vaginal fluids, blood and breast milk. So if any of these body fluids get into the blood of another person, they can get HIV.

When would that happen?

- during unsafe sex (sex without a condom)
- sharing needles (for tattoos, skin piercing, injecting) and cutting tools used in circumcision and custom ceremonies
- from mother to child during pregnancy, birth or when breastfeeding
- HIV infected blood or blood products used for blood transfusions









You CANNOT get HIV from:

- mosquito bites
- shaking hands & kissing
- hugging someone
- playing or working together
- sharing cups, a kava bowl, plates or a meal
- sharing clothes
- swimming together
- using toilets
- sweat or tears
- coughs & sneezes

Most of the infections in the Pacific are happening through people having unsafe sex (sex without a condom).

It's important to know about HIV and safe sex and to tell your friends too.

Remember:

- Someone can have HIV and not be sick.
- You can't tell by looking at someone whether or not they have HIV or any other STI.







You can stay safe by not having sex (abstinence)

or delay having sex until you are in a stable, faithful relationship (and you have both been tested).



You can stay safe by being faithful –

only having one sexual partner who is also faithful to you. You have both been tested and know that you don't have HIV any other sexually transmitted infections (STIs).







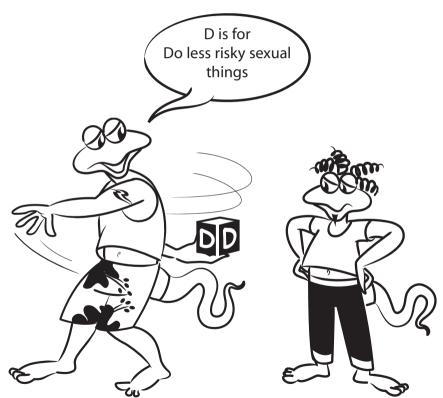
You can stay safe by using condoms properly every time you have sex.

Use condoms for vaginal sex, anal sex, and oral sex.



You can stay safe by doing other sexual things that are less risky

than penetrative sex (penis-in-vagina or penis-in-anus sex)
— such as kissing, hugging, touching, rubbing.







Knowing and loving each other isn't enough to protect you against HIV.

Just because you love your partner doesn't mean that you know everything about their past sexual experiences.

It's important to talk to your sexual partner about safe sex and to be open and honest with each other.

It's also important to use a condom properly every time you have sex—having unsafe sex even once can put you at risk.

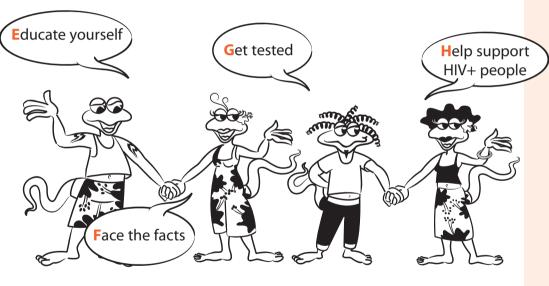


Know your ABCDs and love carefully.

Show that you care by protecting yourself and your partner.

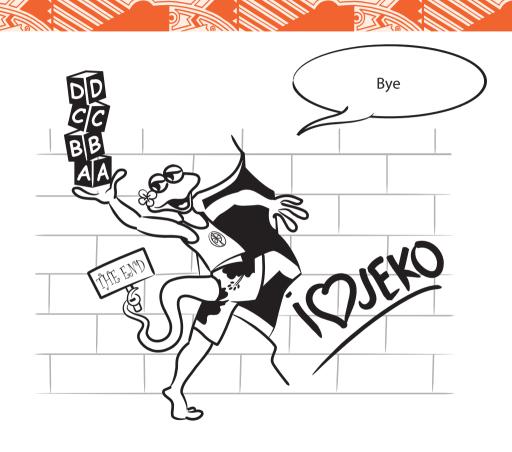






Remember:

- HIV is here in our communities.
- HIV affects everyone.
- It is important that everyone in the community knows how HIV is spread and how to prevent HIV infection.
- ! It is NOT shameful to be HIVpositive.
- People living with HIV/AIDS need love, care and support.





FOLLOW JEKO'S FOOTPRINTS

Friendly resources to help group discussion



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HIV and AIDS definitions

H-I-V stands for:

Human

Immunodeficiency

Virus

When HIV enters the bloodstream through semen, blood or vaginal fluids, it damages the immune system that normally protects us from infections. **HIV** is the virus that causes **AIDS**.

A-I-D-S stands for:

Acquired — Means something you get rather than you are born with

Immune — Means resistance or protection from diseases

Deficiency — Means lack of protective power

Syndrome — Means a variety of symptoms rather than one single disease

AIDS is not a disease, but a syndrome — a collection of symptoms, signs and diseases. These diseases include TB, diarrhoea and other common infections. But because HIV weakens our immune system, these diseases can become life threatening.



What is the relationship between HIV and AIDS?

- AIDS is the syndrome that you can develop after you become HIV-positive.
- § If someone is HIV-positive, they do not necessarily have AIDS.
- If someone is diagnosed as having AIDS (an AIDS-defining illness), then they are HIV-positive.

The main point to remember is that people who are HIV-positive can look and feel perfectly healthy for many years. You cannot tell if someone has HIV by looking at them or their genitals. But it is still possible for them to pass on the virus to other people.

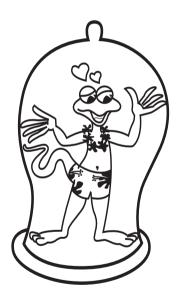
How does HIV weaken the immune system?

Our immune system contains white cells in the bloodstream and lymph nodes, which can recognise germs entering our bodies, can kill them, and remember these kinds of germs if they enter the body again.

When the Human Immunodeficiency Virus attacks our immune system, it starts to destroy our white cells. HIV can stay in the body for some time without making us ill. But, eventually, as more and more of these white cells are killed, the body is unable to fight off the many germs that live in and around our bodies all the time. And in time, as the immune system becomes weaker and weaker, infections take hold and the body cannot fight them.







Ways HIV is transmitted

Unsafe sex is the major way HIV is transmitted

During unprotected sexual contact (sex without a condom) with an infected person, HIV can enter a person's bloodstream through the vagina, penis or anus. It is important to know that the risk of infection is greater if either partner has another sexually transmissible infection, such as syphilis or herpes where a sore or damaged skin might be present. Semen or vaginal fluids of an HIV-infected person can come into contact with open sores or ulcers on or near the genitals of the partner and it is easier for the virus to pass into the partner's bloodstream.

Oral sex: The evidence shows that those people who use condoms consistently, or who don't have penetrative sex at all but who do have oral sex, almost never contract HIV. What makes oral sex risky is the presence of cuts, gum disease, herpes, large ulcers or throat infections. Reducing the amount of sexual fluid (semen or vaginal fluid) that goes into the mouth and throat — particularly semen (not 'coming' in the person's mouth) — will reduce what little risk there is, although it is better not to have oral sex while having sores or infections in the mouth.



Transmission can also occur when HIV-positive blood enters the bloodstream of another person through:

Sharing needles

When drug users use needles to inject, they draw blood up into the needle and syringe, so sharing needles becomes a very risky activity and has caused many cases of HIV infection.

Tattooing or skin piercing

HIV can be passed on from one person to another through infected blood left on instruments used in activities that draw blood such as tattooing, circumcision and body piercing. Tools used for any procedure (including custom ceremonies) that cuts the skin should be properly sterilised (eg in an sterilising machine) before each use.



Any used needle and syringe which has not been properly sterilised can carry the virus from an infected person to the next user of the needle. It does not matter what the syringe contains. The risk is from the blood in the needle and the syringe. Therefore, needles and syringes used by injecting drug users or used for medical treatment need to be sterilised or used only once.





Blood transfusions

In places where blood is not tested, it is possible to get HIV from HIV-infected blood or blood products used for blood transfusions or in other medical treatment.

Transmission from mother to child - or father to mother to child

An HIV-positive mother can pass the virus on to her child. This can mean further problems, such as:

- a risk to the child
- delivery complications
- choosing whether to breastfeed or not

An HIV-positive mother can pass the virus to her child during pregnancy, during labour, or after delivery through breast milk. Without any intervention about 15-30% of mothers with HIV infection will transmit the infection during pregnancy and delivery, and 10-20% through breast milk. The risk of transmission is increased if the mother has recently been infected or is already ill with AIDS, because the amount of virus in the blood is much greater. Prevention interventions include HIV voluntary counselling and testing, replacement feeding, selective Cesarean section, and anti-retroviral drug therapy.

An accident or bloody fight

It is possible for the infected blood of one person to enter the bloodstream of another person through an accident or bloody fight (including through the eye). All blood injuries and blood spills should be treated carefully. Note that this risk is very small, compared with other activities.





HIV CANNOT be passed from person to person by:

- wearing someone else's clothes or using articles belonging to them that they have touched (eg towels, bedding, hairbrush, soap)
- living with or sleeping in the same room as a person with HIV/AIDS
- hugging or playing with a baby or child who has HIV/AIDS
- secaring for children when the adult is HIV-positive
- swimming in a swimming pool, river or waterhole with a person or people with HIV/AIDS
- a person with HIV/AIDS coughing or sneezing on you
- sharing food, cups, kava bowls and plates with a person with HIV/AIDS
- caring for someone who has developed AIDS when basic good hygiene is followed
- Gonating blood if you are not HIV-positive (blood is tested before transfusion)
- mosquitoes or other biting insects







Frequently asked questions

Can kissing pass on HIV?

No, this is very unlikely. Kissing can only carry a risk if there is an exchange of blood from an HIV-positive person to his or her partner. This could only happen though cuts or sores in the mouth, gum disease, herpes, large ulcers or throat infection.

What are the principles of HIV transmission?

There are 4 principles — all must be met for HIV to transmit from one person to another. The first principle is EXIT. HIV exits the body in blood, semen and precum, vaginal fluids and menstrual blood. The second principle is SURVIVE. HIV must survive in the environment in which it has been placed. HIV is very fragile and starts to die if exposed to the air. HIV survives best in warm, moist and dark environments — like the anus, vagina and within a syringe. The third principle is ENTER. HIV must enter the blood supply of another person. HIV can enter the blood supply through cuts or sores (especially through blisters, sores or skin irritations caused by other STIs). The fourth principle is SUFFICIENT QUANTITY. HIV must be in sufficient quantity to cause infection. HIV is in quantities high enough to cause infection in blood, semen and pre-cum, vaginal fluids and menstrual blood.





How can you find out if you have become infected with HIV?

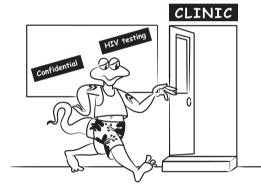
The only way to find out if you are infected with HIV is to have a blood test.

How does the test work?

When germs enter our body, white blood cells in our blood react by producing antibodies which help fight germs. When HIV enters the body, antibodies are formed but they cannot kill the virus. They do, however, indicate that the virus is present. The presence or absence of antibodies in the bloodstream is the basis for the HIV test. A sample of blood has to be taken and analysed. When antibodies are found, we say the blood is HIV-positive or sero-positive.

What is the window period?

HIV antibodies usually take between two and three months to appear in the bloodstream. This period is called the window period. It means that when a test is done in this period, an infected person will test negative, even if he or she has the virus and is infectious! So if a person's behaviour has been risky in the three months before the test and the result is negative, he or she should have another test three months later.









A positive test result means that the person has the HIV virus. But it is important to remember that the HIV test is not a test for AIDS. We do not know how long it takes for someone with HIV to become ill with AIDS. What we do know is that people who are HIV-positive can infect others through their blood, through semen (from men), through vaginal fluids (from women) and through breast milk.

Can HIV infection and AIDS be treated?

There is no vaccine yet that protects people from HIV infection and no cure once a person is infected. However, new and more effective therapies for treating HIV/AIDS continue to be developed. These therapies, a combination of several drugs, have led to a longer life expectancy of infected people and have raised the possibility that HIV/AIDS could become a chronic rather than a fatal infection. These therapies require a rigorous daily dosage (several tablets to be taken at certain times during the day) and often have side effects. It is also important to get treatment for other infections that a person who has HIV/AIDS might get because of their weakened immune system.





HIV/AIDS in the Pacific

The number of officially reported cases of HIV/AIDS in the Pacific is on the increase. HIV/AIDS has now been reported in 19 Pacific countries, but it is generally agreed that these reported numbers are less than the actual number because of the following reasons.

- Differences in the quality of reporting systems between countries. Residents of many Pacific Island countries travel and get tested overseas. Private doctors do not always report cases. Some countries encourage testing and others do not.
- Figure 1. There are large communities of Pacific Islanders in France, Australia, New Zealand and the USA. If people are tested positive in these countries, they may not be reported in their home countries, even though they have returned home to live there.
- In the absence of counselling, many people do not get tested and do not know if they are HIV-positive. They only get tested at the stage when they have symptoms of AIDS. In the meantime they may be having unsafe sex without knowing that they are HIV-positive.
- Fig. There are high rates of STIs and teenage pregnancies in the Pacific. This shows that many people are having unprotected sexual activity (sex without a condom) with multiple sexual partners.
- Sometimes the cause of death can be attributed to other diseases rather than to HIV/AIDS, because AIDS is a condition where your immune system is destroyed and people get sick with many different diseases and may die from these (eg. pneumonia).







Other factors that can contribute to the spread of HIV/AIDS in the Pacific

- Pacific Islanders today are extremely mobile many travel within their own countries and go to other countries to study and to work, including businessmen, politicians, those sent overseas for military purposes and those who work on foreign fishing vessels. People often take sexual risks when they are away from their normal environment.
- Prug and alcohol use can lead to high-risk sexual behaviour.
- Poverty and unemployment and limited economic opportunities can lead to sex in exchange for money and to high-risk sexual behaviour.
- Fourists from countries where HIV/AIDS is widespread and who have unprotected sex can bring the infection to the Pacific.
- A partner who does not have a monogamous (faithful to one partner) relationship puts the other partner at risk.
- Custom practices such as tattooing and circumcision (using unsterilised or shared equipment) and polygamy practices.
- Gender inequalities and increasing levels of violence against women.
- Difficulty in accessing health services in some areas and high rural populations also make access to services and information difficult.



SEXUALLY TRANSMISSIBLE INFECTIONS

VIRUSES

Some symptoms can be treated and go away, some viruses can stay in the system and cause symptoms to return

Infection	Symptoms	Diagnosis and treatment	Consequences if not treated
Genital herpes	Painful tingling and/or itchy blisters developing on the genitals with flu-like symptoms. Can sometimes be diagnosed by a viral swab at the blister stage.	Clears up by itself but virus remains in the body and blisters can reappear. (Acyclovir alleviates symptoms.)	Ongoing pain and discomfort.
Genital warts	Tiny painless lumps (cauliflower looking) around vagina, head or shaft of penis and anus. Sometimes there are no symptoms. This is called the wart virus or HPV.	Detected with a smear test. Treated with paint or freezing. Virus remains in the body and may reappear.	WOMEN: Linked to abnormal changes in cervical cells which can lead to cancer. MEN: Slight risk of cancer of the penis. HPV can cause cancer of the anus if untreated (rare).

	VIRUSES (contd)					
Infection	Consequences if not treated					
Hepatitis A (sexually transmissible with oral-anal contact)	Can cause a fever, tiredness, jaundice (yellow colour) to skin and eye, non-specific aches and pains. It is transmitted orally from: a) faecal contamination. During sexual contact, fingers, tongue or sexual organs, b) can pick up contamination from near the person's anus. More contagious than the other hepatitis infections.	Usually clears up by itself, generally does not cause serious long term liver damage. Recovery usually in two months. Vaccine available.	In rare cases severe and acute and liver failure may occur.			
Hepatitis B	Can cause a fever, tiredness and jaundice (yellow colour) to skin and eyes.	Usually clears up itself, although some people remain carriers. Vaccine available and often given at birth, followed by further 2 doses at 2 monthly intervals.	Liver failure. Chronic carrier state. Chronic persistent or active hepatitis.			



VIRUSES (contd)				
Infection	Symptoms	Diagnosis and treatment	Consequences if not treated	
HIV/AIDS	Virus carriers may show no symptoms for many years or could have flu-like symptoms in early development. Later symptoms may include fever, night sweats and diarrhoea.	HIV blood test is required for diagnosis. There are treatments to keep people healthier for longer but no cure.	HIV causes lifelong infection which damages the immune system. AIDS conditions (infections or cancers) develop between 1 and 20 years following HIV infection (average 10 years).	





BACTERIA

Treated with antibiotics

Infection	Symptoms in women	Symptoms in men	Diagnosis and Treatment	Consequences if not treated
Syphilis	A painless sore on the genitals. palms of the hands and soles o develop in the heart, liver and	of the feet. If untreated may	Blood tests and ulcer swabs. Cured with antibiotics.	Neurosyphilis, cardiovascular syphilis, death.
Gonorrhoea (drip, clap, Jack, dose etc)	Often no symptoms. increased or changed discharge, pain when urinating, irregular bleeding, crampy pain. If untreated can lead to infertility.	A heavy pus-like discharge and irritation when urinating.	Urethral, cervical or anal swabs. Cured with antibiotics.	MEN: Spread of infection to prostate epididymis, testes. WOMEN: Pelvic inflammatory disease, ectopic pregnancy, infertility.

5		55

	BACTERIA (contd)					
Infection	Symptoms in women	Symptoms in men	Diagnosis and treatment	Consequences if not treated		
Chlamydia	Often no symptoms. Increased discharge or irritation can occur when urinating, irregular bleed- ing. If untreated can lead to infertility.	Often no symptoms. Causes urethritis in men. Pain when passing urine and discharge from penis. May lead to infertility.	Urine specimen or urethral, cervical swabs. Cured with antibiotics.	WOMEN: Pelvic inflammatory disease, risk of ectopic pregnancy and infertility. MEN: may lead to infertility.		
NSU (non-specific urethritis)	Not found in women.	Clear discharge from the penis and/or stinging when urinating.	Urine specimen or urethral swabs. Cured with antibiotics.	Potential re-infection of women partners with chlamydia or gonorrhoea.		
Trichomoniasis	A frothy discharge, with an unpleasant odour and/or an inflamed vagina and itchiness.	Men usually have no symptoms.	Urine specimen or urethral swabs. Cured with antibiotics.	Inflamed cervix or urethra.		



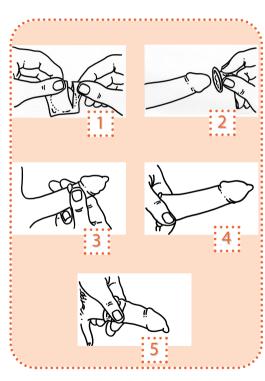


MITES (curable if treated with body paints and special shampoos)				
Infection	Symptoms	Diagnosis and treatment	Consequences if not treated	
Scabies (Tiny mites that bury under the skin.)	Itchiness in pubic area and warm parts of the body (armpits, behind knees).	Blister fluids for microscopy. Curable with body paints and special shampoos.	Ongoing discomfort.	
Pubic lice (crabs)	Pinhead-sized lice (under a microscope they look like crabs). Appear in pubic hair and other areas and cause itchiness.	Identify lice. Curable with body paints and special shampoos.	No major long-term risks, although secondary infection can occur.	

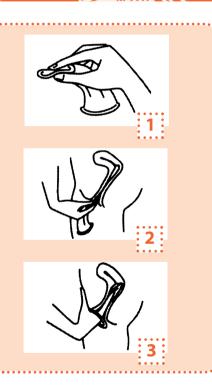
	FUNGUS (curable with anti-fungus creams)					
Infection	Symptoms in women	Symptoms in men	Diagnosis and treatment	Consequences if not treated		
Thrush (candida)	A creamy thick discharge, smelly, itchy and inflamed vagina/anus. (not always infected through sexual contact). Can also develop through stress or a course of antibiotics.	An itchy rash on the penis or around anus. Can be found in mouth, throat.	Urine specimen or swabs. Cured with anti-fungal creams, other natural options.	Ongoing pain and discomfort.		

HOW TO USE A CONDOM

- Check the expiry date.
- Open the packet carefully. (1)
- Don't unroll the condom before putting it on.
- Squeeze the teat on the tip of the condom and hold it against the tip of the penis. This makes sure there is no air left in the condom. (2)
- Unroll the condom all the way down the penis to the base. (3)
- After ejaculation, the penis should be withdrawn before the erection is completely lost. Hold on to the condom when withdrawing. (4)
- When you take it off, do not allow the condom or penis to touch your partner's genital area. (5)
- Spose of condom carefully.







HOW TO USE A FEMALE CONDOM

- Check the expiry date on the packet (under the flap at the back).
- Open the packet carefully.
- Rub the condom to spread the lubricant.
- Put the female condom into the vagina with your fingers. To do this:
 - Hold the condom at the closed end and squeeze the ring inside the condom so it becomes long and narrow. With the other hand, separate the outer lips of the vagina.
 - Push the condom into the vagina as far as it will go use a finger to
 push up the inner ring until you feel the cervix. Push it up don't
 twist it.
 - Make sure that the open end of the condom always stays outside the vaginal opening.
- Guide the penis inside the condom.
- To take the condom out, squeeze and twist the outer ring, then pull out the condom. Dispose of condom carrefully — do not use it again.

Do not use a male condom along with a female condom.



Glossary of terms

Abstinence: Choosing not to have sex (oral, anal or vaginal) at all.

AIDS: Acquired Immune Deficiency Syndrome caused by the HIV virus .

Anal intercourse: A form of sexual intercourse where a man puts his penis inside the anus of his partner.

Antibodies: Protein molecules produced by the body in response to an infection. The antibodies produced to fight infection with HIV are not usually effective.

Antibody positive: A blood test result showing that a person has been infected with the HIV virus and has developed antibodies to it. It does not mean that a person has AIDS.

Anus: The opening at the lower end of the bowel.

Bisexual: A bisexual person is attracted to and may have sex with both males and females.

Celibacy: Not having sex for a prolonged period of time.

Chlamydia: A vaginal or urinary infection which can be sexually transmissible.

Condom: Male condom: a thin rubber sheath worn over a man's penis during sexual intercourse to prevent pregnancy, HIV/AIDS and STIs. Female condom: a thin polyurethane condom with a flexible ring at each end; it protects a woman against pregnancy and STIs.

Cunnilingus: When a person uses their mouth to lick, kiss or suck a woman's genitals.

Ejaculation: When the muscles of the penis contract and send semen out of a man's body.

Erection: When a man's penis becomes hard.

Fellatio: When a person uses their mouth and tongue to stimulate a man's penis.





Gonorrhoea: An STI caused by bacteria. Untreated, it can cause complications, particularly infertility in women.

Herpes: A viral infection which produces painful blisters in the mouth, anus or genital area and can be sexually transmissible.

Heterosexual: Someone who is attracted to and may have sex with the opposite sex.

HIV-positive: See sero-positive.

Homosexual: Someone who is sexually attracted to and may have sex with people of the same sex. Can refer to either sex.

Hygiene: taking care not to catch germs or pass them on. **Immune system:** The bodily system which fights infection.

Intercourse: Sex where a man puts his penis into a woman's vagina is called vaginal intercourse. When he puts it into a man's or woman's rectum (through the anus) this is called anal intercourse.

Massage: Caressing and stroking the body for sensual and/or sexual enjoyment or relaxation.

Masturbation: Making yourself sexually excited by touching your genitals and other sensitive parts of your body.

Monogamous: Being in a relationship with one person and only ever having sex with that one person.

Opportunistic infections: Infections which take advantage of the opportunity offered by the body's weakened immune system to cause illness.

Oral sex: When a person uses their mouth and tongue to stimulate another person's genitals (see also cunnilingus and fellatio).

Orgasm: A sexual climax that can occur during sexual activity, masturbation or wet dreams. Both men and women have orgasms.

Pre-cum: The clear fluid that appears on the end of the penis during arousal.





Safer sex: Ways of having sex that reduce the risk of contracting HIV or other STIs, and pregnancy; any sexual activity that doesn't involved body fluids (semen and vaginal fluid) being transferred.

Semen: The fluid containing sperm ejaculated from a man's penis. A small amount of fluid called pre-cum may also appear on the end of the penis during arousal and before ejaculation.

Sero-positive: A person who has a positive test result after the HIV antibody test, which means they have antibodies to HIV in their blood (see also antibody positive).

Sex: Used in the context of sexual behaviour. See intercourse and safer sex.

Sperm: Male reproductive cells in the semen.

Sterilised: Heated to a high temperature to kill all germs.

STIs: An abbreviation for sexually transmissible infections. Any infection that can be spread through sexual contact (see also VD).

Syphilis: A sexually transmissible infection that in its final stages can cause serious heart problems, brain damage and paralysis.

Thrush: A common yeast infection that causes itchiness in the vagina.

Trichomoniasis: An infection of the vagina caused by bacteria.

Urethra: The tube that conducts urine from the bladder in women, and urine or semen in men.

Vaginal intercourse: When a man puts his penis in a woman's vagina.

Vaginitis: Vaginal inflammation from infection or chemical irritation.

VD: Abbreviation for venereal disease. Any infection spread through sexual intercourse or sexual contact (see also STIs).

Withdrawal: Removal of the penis from the anus or vagina before ejaculation occurs.

