

PANCAP Regional Stigma and Discrimination Unit



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SCALING UP THE CARIBBEAN'S RESPONSE TO HIV AND AIDS





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Acknowledgement

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Section 1: HIV and AIPS

Objectives:

- * To learn the difference between HIV and AIDS.
- ***** To understand how HIV is transmitted from one person to another.
- * To breakdown the basic facts and myths about HIV and AIDS.
- To understand which activities put us at risk of HIV infection and which activities are safe.
- ***** To learn basic facts of HIV in the Caribbean.

1.1 What is HIV?

HIV is the virus that causes AIDS.

HIV stands for:

- H Human: The virus is only found in humans.
- Immunodeficiency: This refers to a deficiency in the body's immune system.
- ▼ Virus: There is no cure for a virus.

Each day approximately 7,400 people are infected with HIV, 40% of them are under the age of 25. HIV is a virus. People become infected with HIV when the virus enters the body. Viruses such as HIV cannot grow or reproduce on their own, they need to infect the cells of a living organism in order to replicate and multiply. Normally, the human immune system works to find and kill viruses fairly quickly. HIV is problematic because it attacks the immune system itself - the very thing that would usually get rid of a virus!

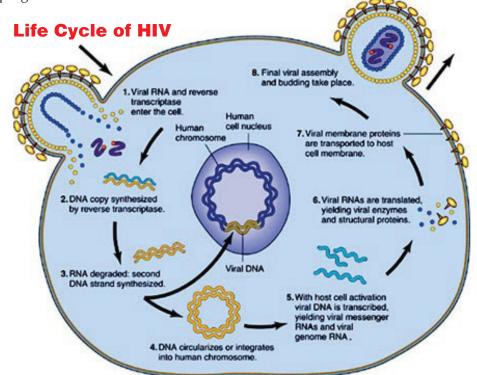
Overtime, the virus begins to destroy the body's immune system and the ability to prevent infections, this is when the person develops symptoms of AIDS. If left untreated, it takes around ten years on average for someone with HIV to develop AIDS. This, however, is based on the person with HIV having a well-balanced diet- someone who is malnourished may progress from HIV to AIDS more quickly. People living with HIV are referred to as carrier and can pass the virus on to other people.

What is AIDS?

AIDS is the late stage of infection caused by HIV.

AIDS stands for:

- A Acquired: This means that HIV, the virus that leads to AIDS, is passed from one infected person to another person.
- Immuno: This refers to the body's immune system. The immune system is made up of immune cells which protect the human body from diseases.
- D Deficiency: This means not having enough of something. With regards to AIDS, the body does not have enough immune cells which are needed to protect against infection. The HIV virus invades the body and enters the immune cells. It then sits in the immune cells and waits patiently for years. After some time, the virus begins to multiply, making millions of new HIV viruses. These viruses burst out of the immune cells killing them and attacking new cells. The cycle then starts over. Eventually the virus kills too many immune cells and the immune system can no longer do its job. This is when an individual has progressed to AIDS.
- S Syndrome: a collection of signs and symptoms, illnesses or infections associated with a particular disease or condition. People with AIDS have symptoms and diseases that occur together only when HIV infection has progressed to AIDS.



Source: The Daily Monthly: How HIV Works (1999). Dimensions of Human Sexuality. Retrieved March, 2011, from http://dailymonthly.com/?p=158

1.2 How is HIV passed on?

HIV is found in the blood and the sexual fluids of an infected person, and in the breast milk of an infected woman. HIV transmission occurs when a sufficient quantity of these fluids get into someone else's bloodstream.

There are various ways that a person can become infected with HIV:

- **Unprotected sexual activities with an infected person:** Sexual activities without a condom carries the risk of HIV infection.
- **Contact with an infected person's blood:** If sufficient blood from somebody who has HIV enters someone else's body, then HIV can be passed on in the blood.
- **Use of infected blood products:** Many people in the past have been infected with HIV by the use of blood transfusions and blood products which were contaminated with the virus. In much of the world this is no longer a significant risk, as blood donations are routinely tested for HIV.
- **Injecting drugs:** HIV can be passed on when injecting equipment that has been used by an infected person is then used by someone else. In many parts of the world, often because it is illegal to possess them, injecting equipment is shared.
- **From mother to child:** HIV can be transmitted from an infected woman to her baby during pregnancy, delivery and breastfeeding.



1.3 Facts about HIV

Source: HIV and AIDS Information (2011). ADVERTing HIV and AIDS. Retrieved March, 2011, from http://avert.org/

What's the big deal about HIV and AIDS?

It's easy to think that HIV and AIDS is something for other people to worry about - gay people, drug users, people who sleep around. This is wrong - all teens, whoever you are, wherever you live, need to take the threat of HIV, the virus that causes AIDS, seriously. To be able to protect yourselves, you need to know the facts and how to protect yourself.

* Isn't it only a problem for adults?

No. HIV is a big problem for young people, as well as adults. It is estimated that in 2007 there were **2 million people under 15 living with HIV.** In fact, globally AIDS is the second most common cause of death among 20-24 year olds with approximately 7,400 people becoming infected with HIV every day- 40% of them are under the age of 25.

* What's the difference between HIV and AIDS?

HIV is the virus that causes AIDS (*see section 1.1). HIV stands for the 'Human Immunodeficiency Virus' and AIDS stands for the 'Acquired Immune Deficiency Syndrome'. AIDS is a serious condition in which the body's defenses against some illnesses are broken down. This means that people with AIDS can get different kinds of diseases which a healthy person's body would normally fight off quite easily.

* How long does it take for HIV to cause AIDS?

The length of time between being infected with HIV and being diagnosed with AIDS depends on various factors, however, there are many drugs that are used to help people with HIV delay the progression to AIDS. These are called antiretrovirals or ARVs for short. People infected with HIV can live healthy, productive lives for a long time once they adhere to their very strict treatment plan. Many people do not know exactly when they were infected with HIV, and the length of time between this happening and being diagnosed with AIDS can vary.

* So how do you get infected with HIV?

HIV is passed on in the sexual fluids or blood of an infected person, so if infected blood or sexual fluid gets into your body, you can become infected (*see section 1.2). HIV CANNOT be transmitted by kissing, hugging or shaking hands with an infected person, and it definitely cannot be transmitted by sneezes, door handles or sharing glasses.

* What about using drugs?

The only way to be safe around drugs is not to take them. If you are using drugs you are more likely to take risks you normally wouldn't take, and you may have unsafe sex when

you would normally be more careful. If you are using drugs, you might find it more difficult to use a condom, or you might forget to use one altogether. One of the most common substances this can happen with is alcohol - if you're drunk, you will not be in full control of your body and your actions, your inhibitions are lowered and the likelihood that you will do something that you would not normally do sober is increased.

* Can you get infected your first time?

Yes, if your partner has HIV and you have unsafe sex, then you can become infected.

Is there a cure?

There is no cure for HIV. HIV is a virus, and no cure has been found for any type of virus. Recently, doctors have been able to control the virus through antiretrovirals (ARVs), which means that a person with HIV can stay healthy for longer, but they have not discovered a way to get rid of the virus in the body completely.

* What is HIV antiretroviral drug treatment?

ARVs are the main type of treatment for HIV or AIDS. It is not a cure, but it can stop people from becoming ill for many years. The treatment consists of drugs that have to be taken every day for the rest of a person's life. The aim of antiretroviral treatment is to keep the amount of HIV in the body at a low level. This stops any weakening of the immune system and allows it to recover from any damage that HIV might have caused already.

* How can I tell if someone is infected with HIV?

There is no way to tell just by looking at someone whether they are infected with HIV. Someone can be infected but have no symptoms and still look perfectly healthy. They might also feel perfectly healthy and not know themselves that they are infected. The only way to know if a person is infected or not is if they have an HIV test.

* How can I get tested?

You may find it helpful to talk to an adult - perhaps a parent, school nurse or teacher may be able to advise you where you can have a test. It's much better to talk to someone than to worry on your own. The clinic will suggest that you wait 6 weeks after your last risky sexual contact before having a test. This is because the virus is difficult to detect immediately after infection.

1.4 How HIV is NOT transmitted...

HIV can only live inside the human body. It cannot survive outside the body as it starts to die as soon as it is exposed to the air. If it is exposed to heat (for example, if someone bleeds into a cooking pot) it will die. **HIV is not transmitted by casual contact.**

- **HIV** cannot pass through the skin on the outside of your body unless there is an open cut- your skin protects you.
- **HIV** cannot be transmitted through saliva, tears, vomit, feces or urine, even though small amounts of HIV have been found in these fluids. HIV is not found in sweat.
- **HIV** cannot be transmitted through casual contact such as touching, sharing pencils, pens, books, eating or drinking utensils or using the same toilet seats.
- There is no risk in caring for a person living with HIV if the person follows precautions such as using gloves when cleaning up blood and keeping cuts covered.
- *** HIV** is not transmitted by mosquitoes or other blood sucking insects.
- *** HIV** cannot be transmitted by sharing food or cooking utensils such as knives, forks, spoons, cups, plates, etc.



Universal Safety Precautions:

In order to protect yourself, as well as to avoid stigmatizing people living with HIV, it is suggested to follow universal safety precaution. This means treating all human blood and bodily fluids as if they are infectious.



1.5 Facts & Figures Source:

UNAIDS, (2011). Caribbean Fact Sheet. Retrieved February, 2011, from http://www.unaids.org/en/regionscountries/regions/caribbean/>

- * The Caribbean has the second highest HIV prevalence rate next to Sub-Saharan Africa.
- By 2008, it was estimated that there were between 210,000 and 270,000 PLHIV in the Caribbean.
- * The main mode of transmission is through unprotected sex between men and women.
- Increased access to antiretroviral treatment (ART) has led to a decrease in the mortality associated with AIDS. Since 2001, there has been a 40% decline in AIDS-related mortality in the Caribbean.
- Better access to treatment means that people are living longer, healthier, and more productive lives. In 2010, 51% people who needed ART were able to access it. Though, that still means that 49% of people could not.
- Although there has been much success associated with ART, HIV and AIDS remains the leading cause of death among men and women aged 20-59.
- Statistics show that the number of females living with HIV is increasing.
 Women, particularly young women, account for 53% of all PLHIV.
- HIV prevalence is highest among Men who have Sex with Men and Sex Workers.
- Young people must be considered a priority in national responses to HIV, because young people are MSM, SW and part of MARPs.

Estimated number of PLHIV and Adult HIV Prevalence in 2007. Source: The Status of HIV in the Caribbean, UNAIDS, 2010.

Country	Estimated PLHIV	Adult HIV Prevalence
Bahamas	6,200	3.0%
Barbados	2,200	1.2%
Belize	3,600	2.1%
Cuba	6,200	0.1%
Dominican Republic	62,000	1.1%
Guyana	5,900	1.2%
Haiti	120,000	2.2%
Jamaica	27,000	1.6%
Suriname	6,800	2.4%
Trinidad & Tobago	14,000	1.5%
Total	226,900	

1.6 Activity- Test your Knowledge: Sorting through HIV Facts and Myths.

Facilitators guide: Provide each person with one of the statements below. Ask participants to read aloud their statement to the rest of the group. As a group, discuss weather the statement is TRUE or FALSE and WHY.

- 1. You can get HIV from a mosquito.
- 2. You can get HIV from French kissing (kissing with tongue).
- 3. You can get HIV from getting or giving a hickey.
- 4. HIV is transmitted through blood. 5. HIV is transmitted through breast milk.
- 6. HIV cannot be transmitted through anal sex.
- 7. You can get HIV by sharing a glass with someone who is infected.
- 8. A person can reduce the risk of getting HIV by using a condom every time they have sex.
- 9. A person can avoid getting HIV by abstaining from sex.
- 10. A person cannot get HIV the first time they have sex.
- 11. You can get HIV by using the same toilet seat as someone who is infected.
- 12. HIV is only a problem for adults.
- 13. Using drugs or alcohol can increase the risk of getting HIV.
- 14. There is a cure for HIV.
- 15. You can get HIV if someone who is infected sneezes on you.
- 16. The birth control pill protects against HIV.
- 17. You cannot get HIV from oral sex.
- 18. You can get HIV by sharing a cigarette with someone.
- 19. Two HIV positive people can have unprotected sex.
- 20. An HIV positive woman can have a baby that is not infected.
- 21. You cannot get HIV from getting a tattoo or piercing.
- 22. Donating blood or getting a blood transfusion can put you at risk for getting HIV.
- 23. HIV cannot be transmitted through blood once outside of the body.
- 24. All pregnant women should be tested for HIV.
- 25. You should get tested for HIV the day after a high-risk encounter eg. Having unprotected sex.
- 26. There is no difference between HIV and AIDS.
- 27. A healthy looking person cannot have HIV.

Section 2: Stigma & Piscrimination

"Stigma remains the single most important barrier to public action. It is a main reason why too many people are afraid to see a doctor to determine whether they have the disease, or to seek treatment if so. It helps make AIDS the silent killer, because people fear the social disgrace of speaking about it, or taking easily available precautions. Stigma is a chief reason why the AIDS epidemic continues to devastate societies around the world."

> - Ban Ki Moon, United Nations Secretary-General, 2008

Objectives:

- To define and understand the meaning and causes of stigma and discrimination.
- ***** To understand the different types of stigma.
- To understand the consequences of stigma and discrimination for preventing HIV infection, treatment, and caring for people with HIV.
- * To describe different forms of stigma and discrimination
- * To find ways that we can prevent stigma and challenge discrimination.

2.1 What is Stigma & Discrimination?

- * Stigma is when people think that a person or group is worth less than others.
 - People may be stigmatised because of illness, sex, race, gender, age, disability, their work or their religion. HIV related stigma refers to all negative attitudes, beliefs, and policies directed at people who are believed to be living with HIV, as well as to their loved ones, social groups and communities.
 - Discrimination is when a stigmatised person is treated unfairly or unjustly because they have HIV, are perceived to have HIV, or they belong to a group seen as at high risk of getting HIV.
 - HIV stigma and discrimination builds on negative attitudes, inequalities and injustices that already exist about gender, age, poverty, race or sexual behaviour in others. For example, many people blame women, young people, homosexuals, or people from outside the country or community for HIV.
 - Stigma automatically leads to discrimination. They are linked to each other. If there is no stigma then there will be no discrimination.

2.2 Different types of HIV-Related Stigma:

Source: Smart, Rose. UNESCO. HIV/ AIDS-Related Stigma and Discrimination. Retrieved February, 2012, from <www.iiep.unesco.org/fileadmin/user_upload/Cap.../pdf/1_4.pdf>

Stigma is expressed in a number of different ways and at different levels. There are three main categories of stigma: self-stigma, felt or perceived stigma, and enacted-stigma.

Self-Stigma

Definition: Self-stigma is, for example, self-hatred, shame, blame etc. Self-stigma refers to the process whereby people living with HIV inflict feelings of difference, inferiority and unworthiness on themselves.

Symptoms of self-stigma include:

- * Feelings of shame, guilt, self-blame and inferiority.
 - * Loss of self-esteem and confidence.
 - ***** Social withdrawal and isolation.
 - Change in relationships with partner, friends and/or family members.
 - * Self-exclusion from services (health care etc.) and opportunities (work, school etc.).
 - * High levels of stress and anxiety.
 - **★** Fear of disclosure.

***** Self-stigma is worse when an individual:

- Is first diagnosed. Especially if there is limited support/ counseling at this time.
- * Does not have a good support system.
- * Already has low self esteem.
- Does not have accurate information about HIV and AIDS.

Overcoming self-stigma is assisted through:

- Being referring to a peer support network right away.
- Good quality pre and post-test and on-going counselling.
- * Disclosure of HIV status to loved ones.
- Encouragement to access available services and opportunities.
- Receiving accurate information about HIV and AIDS.
- Ease of access to ARV treatment (if in need of medication).

Knowledge of universal Human Rights.

Felt or Perceived Stigma

Definition: Felt stigma refers to real or imagined perceptions or feelings that society may judge or discriminate against a group based on a particular attribute, for example, people living with HIV.

Characteristics of felt stigma include:

- Pointing out or labeling differences- "them and us". This can lead to avoidance, shunning, isolation and rejection.
- * Stereotyping. Attributing differences to negative behaviour such as promiscuity, homosexuality, drug use, etc.
- ***** Emotional abuse.

Enacted Stigma

Definition: Enacted stigma refers to the real experience of discrimination. With regards to HIV, enacted stigma is the act of rejection that has taken place as a result of a specific characteristic, including a person's HIV status.

Enacted stigma can take many forms such as:

- * Physical and social isolation from family, friends and community.
- Being kicked out of one's family, house, rented accommodation, school, and community groups.
- ***** Gossip, name-calling, bullying and insults.
- ***** Judging, blaming and condemning.
- * Loss of rights and decision-making power.
- * Stigma by association e.g. the whole family is affected by the stigma.
- * Stigma by looks/ appearance/ occupation.
- ***** Loss of employment.
- ***** Impaired access to treatment and care.
- ***** Expulsion from school.
- ***** Depression, suicide, substance abuse.
- Avoiding getting treatment.
- ***** Break-up of relationships.
- ***** Violence.

2.3 Why Is there HIV-Related Stigma & Discrimination?

HIV is a life-threatening illness, and because of this people react to it in strong ways. There are several factors contributing to HIV-related stigma and discrimination:

Moral Judgement – People with HIV may be judged as having done something immoral. HIV infection is often associated with behaviours, such as homosexuality, substance abuse, prostitution or promiscuity, which are already stigmatized in most communities and taboo topics to discuss.

Fear and ignorance – There is a great deal of inaccurate information about how HIV is transmitted. Lack of education results in irrational behaviour and fear of getting HIV through casual contact (touching, sharing, etc.).

Gender and poverty – Women, youth and poor people tend to be more stigmatised than men, older people and rich people.

Appearance – The appearance of someone who is sick, for example may be very thin or have skin rashes, is commonly used as a reason for stigmatizing. This is often associated with the second point: fear and ignorance about transmission.

2.4 Consequences of Stigma & Discrimination

- Stigma and discrimination can lead to denying people living with HIV of their human rights. For example, they may be denied the right to get a job, to get married, to stay in school, to get health care, to travel or return to their own country, to live peacefully in their own community and even to life.
- * Stigma, discrimination and the violation of basic human rights significantly worsens the results of the HIV epidemic.
- People living with HIV, or who may be at risk, often stigmatize themselves with feelings of shame, guilt and fear. People may avoid getting tested or practicing safer sex in case people suspect them of having HIV. People may also not want to get the proper treatment and care they need if they have HIV because they are fearful that others may find out, and how they might react if they do.
- The stigma related to HIV causes high stress and anxiety which results in people living with HIV to become sick more quickly.
- Stigma not only makes it more difficult for people trying to come to terms with HIV and manage their illness on a personal level, but it also interferes with attempts to fight the AIDS epidemic as a whole by generating a veil of secrecy around the virus, and pushing it underground.

2.5 Stigma and Discrimination in Different Settings: Youth

Stigma & Discrimination in the Family and Community

The family and community are meant to be the support system and care-givers for young people, however this is not always the case. Stigma and discrimination in the family and community can lead to:

- With regards to HIV- isolation of both the infected and affected person due to fears that HIV can be transmitted through casual contact.
- Rejection from community in participating in activities based on characteristics including, HIV status, sexual orientation, reputation, etc.
- Lack of support from family members, specifically parents or guardians- youth being forced to leave the household.
- ***** Physical abuse as punishment.
- Family members and/ or family friends/ community members can sometimes be perpetrators of sexual abuse and in some cases, the cause of HIV infection. There are many layers of shame and blame for youth in these situations.

Stigma & Discrimination in Schools

Schools can significantly contribute to stigma and discrimination against infected and affected PLHIV and other vulnerable groups, including MSM and youth engaging in transactional sex. Some examples of what happens in a school setting include:

- ***** Refusal to allow youth into school.
- ***** Bullying.
- Isolation due to fears that HIV can be transmitted by casual contact, i.e. sharing pens, pencils, notebooks, etc.
- ***** Refusal to teach infected or affected students.
- Restrictions on clear and accurate information on sexual and reproductive health and rights.
- ✤ Physical violence.
- Physical/ emotional abuse on route to school, for example, on public transport, where there are no school administrators around.

Stigma & Discrimination in Health Services

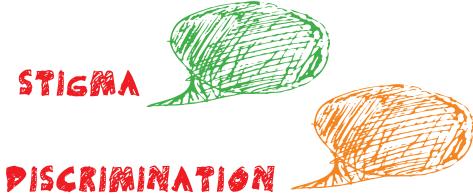
Health services in the Caribbean discriminate against youth accessing their sexual and reproductive health and rights. Examples of these actions include:

- * No youth friendly sexual health service facilities.
- Ambiguous legislation. For example, in Barbados persons under the age of 18 are regarded as minors according to the Minors Act and therefore cannot access medical care, including a test for HIV, without parental consent. However, based on the Sexual Offenses act, persons over the age of 16 are deemed competent and can therefore consent to having sexual intercourse.
- * No legal access to condoms under the age of 18.
- ***** Violations of confidentiality.

Stigma & Piscrimination Activities

2.6 Activity: Group Brainstorm

Divide up the class into 4 or 5 groups. In your groups brainstorm as many words as you can that you associate with the terms 'stigma' and 'discrimination' and write them down in the space provided below. You have 4 minutes to see which group can come up with the most words. Discuss.



2.7 Activity: Personal Stories of stigma and discrimination

- 1 Divide into pairs. Tell your partner about:
 - * An incident when you felt that you were discriminated against.
 - ★ How did you feel? How did you react?
- 2 As a group, share the feelings and reactions that you discussed of how you felt when you were discriminated against, not the incident itself.
- 3 In pairs again, share:
 - * An incident when you discriminated against someone.
 - * How you felt and why you did it.
 - * How the other person reacted and appeared to feel.
 - * How you would behave now and how you could make amends.
- 4 As a group, share the reasons why you discriminated against someone and the reactions from the other person, not the incident itself. Answer as a group:
 - * What does this teach us about discrimination?
 - * What are the causes of it? What are the consequences?
 - * What do we do to protect ourselves from the effects of discrimination against ourselves or our discrimination towards others?
 - * How can we best challenge and cope with discrimination?

2.8 What can we do to STOP Stigma and Discrimination?

Putting an end to HIV-related stigma and discrimination will take a lot of effort from everyone. The first step is to **change our own attitude – the way we think, talk and act towards people living with HIV** and other vulnerable groups. This begins with education! People living with HIV and AIDS must be treated like anyone else. When we are able to do this, only then can we make a change.

- Stop condemning people living with HIV as 'bad people'. Whether you agree with someone's lifestyle or not, we do not have the right to judge them. We need to put ourselves in the shoes of the other person – how would you feel if you were stigmatized?
- Look at people living with HIV as people with an illness- like cancer or diabetes, not people who behave badly. We should stop labeling people living with HIV as immoral and focus our attention on helping them to stay healthy and prevent HIV transmission to others. People living with HIV need friends, family and the community to support them, and to challenge and educate those who stigmatize and discriminate.
- ***** Talk with your family and friends and help them to see that stigma is wrong. Everyone is entitled to basic human rights, we need to recognize that discrimination and social exclusion of HIV infected and affected people is a violation of their human rights.
- Provide information about HIV transmission so that families no longer isolate people living with HIV out of fear of casual contact. You CANNOT get HIV from sharing utensils, bed linens, the phone, from sitting on the same toilet seat, eating from the same pot, hugging, or holding hands.......etc!
 - Reach out and support people living with HIV. Think about it, once you feel accepted, you will more likely be willing and open to discuss a problem or concern with your peers, family or your community. It is the same for people living with HIV, once they feel accepted, they will feel more comfortable opening up to others about their status, accessing healthcare and other services and they will help stop the spread of the virus by perhaps sharing their story, and educating others.

"Only after we have changed ourselves can we educate and challenge others. It takes courage to stand up and challenge others when they stigmatize people living with HIV, but this is one of the ways to stop stigma. Breaking the silence and getting people to talk openly is the first big step." - UNESCO, 2007

2.9 Activity: Role-plays

- 1 Divide into three groups.
- 2 Each group is to prepare two role-plays to show one of the following situations:
 - * A young person who is living with HIV.
 - * A young person who's family member or members are living with HIV.
 - An orphan whose parents have both died from AIDS, and is now living with a new family.

The first role-play should show what may go wrong for a young person in this situation. The second role-play should show positive ways to cope with the situation.

The role-plays can show what the young person can do themselves, what their family and friends can do, and what the community leaders and health workers, teachers and so on can do to positively cope with the situation.

- 3 Ask each group to show their role-plays and bring out what different people can do to help each other cope with HIV.
- 4 Group feedback.

2.10 Activity: Group Debate

Separate the group into two. One side will brainstorm FOR and the other side AGAINST one of the following topics (the group can also brain storm additional topics if there is time).

* Remind the group to think of what the other side will probably argue and come up with rebuttal points as well.

Possible debate topics include:

- HIV testing should be mandatory in schools and the workplace.
- People who are HIV positive should be required to reveal their status.
- HIV is a punishment for bad behaviour, so those with HIV deserve what they get.

Debate do's- remember to:

• Be polite and courteous; Listen attentively; Be respectful and supportive of your peers; Speak only when recognised by the moderator; Allow others to express their opinions; do not monopolize the debate



Section 3: Stigma and Piscrimination & Human Rights

Objectives:

- * To examine Human Rights.
- * To examine Sexual Rights.
- * To understand the relationship between HIV and Human Rights.

3.1 What Are Human Rights?

Human rights are rights inherent to all human beings, whatever our nationality, place of residence, sex, national or ethnic origin, colour, religion, language, or any other determination. All people are equally entitled to basic human rights without discrimination.

Some dictionaries define the word 'right' as 'a privilege', however, when used in the context of 'human rights', we are talking about something much more basic. A right differs from a privilege because a privilege can be taken away. 'Rights' are things that every individual has. They have been created for our safety and protection, and to maintain peace.

Most people know some basic information about their rights, for instance, the right to food and shelter. However, there are many other very important rights that are not very well known.

When human rights are not well known, many abuses such as discrimination, intolerance, injustice, oppression and slavery can arise.

The United Nations Declaration of Human Rights, signed in 1948, was born out of the atrocities and enormous loss of life during the Holocaust in World War II to provide a common understanding of what everyone's rights are.

EVERY HUMAN HAS RIGHTS

3.2 United Nations Universal Declaration of Human Rights

Source: Youth for Human Rights, (2011). Universal Declaration of Human Rights Simplified. Retrieved February, 2011, from http://www.youthforhumanrights.org/what-are-human-rights/universal-declaration-of-human-rights/articles-1-15.html

Simplified Version: This simplified version of the 30 Articles of the Universal Declaration of Human Rights has been created especially for young people by Youthforhumanrights.org.

- 1. **We Are All Born Free & Equal.** We are all born free. We all have our own thoughts and ideas. We should all be treated in the same way.
- 2. **Don't Discriminate.** These rights belong to everybody, whatever our differences.
- 3. **The Right to Life.** We all have the right to life, and to live in freedom and safety.
- 4. **No Slavery.** Nobody has any right to make us a slave. We cannot make anyone our slave.
- 5. **No Torture.** Nobody has any right to hurt us or to torture us.
- 6. You Have Rights No Matter Where You Go. I am a person just like you!
- 7. **We're All Equal Before the Law.** The law is the same for everyone. It must treat us all fairly.
- 8. **Your Human Rights Are Protected by Law.** We can all ask for the law to help us when we are not treated fairly.
- 9. **No Unfair Detainment.** Nobody has the right to put us in prison without good reason and keep us there, or to send us away from our country.
- 10. **The Right to Trial.** If we are put on trial this should be in public. The people who try us should not let anyone tell them what to do.
- 11. **We're Always Innocent Until Proven Guilty.** Nobody should be blamed for doing something until it is proven. When people say we did a bad thing we have the right to show it is not true.
- 12. **The Right to Privacy.** Nobody has the right to come into our home, open our letters, or bother us or our family without a good reason.
- 13. **Freedom to Move.** We all have the right to go where we want in our own country and to travel as we wish.
- 14. **The Right to Seek a Safe Place to Live.** If we are frightened of being badly treated in our own country, we all have the right to run away to another country to be safe.
- 15. **Right to a Nationality.** We all have the right to belong to a country.
- 16. **Marriage and Family.** Every adult has the right to marry and have a family if they want to. Men and women have the same rights when they are married, and when they are separated.
- 17. **The Right to Your Own Things.** Everyone has the right to own things or share them. Nobody should take our things from us without a good reason.

- 18. **Freedom of Thought.** We all have the right to believe in what we want to believe, to have a religion, or to change it if we want.
- 19. **Freedom of Expression.** We all have the right to make up our own minds, to think what we like, to say what we think, and to share our ideas with other people.
- 20. **The Right to Public Assembly.** We all have the right to meet our friends and to work together in peace to defend our rights. Nobody can make us join a group if we don't want to.
- 21. **The Right to Democracy.** We all have the right to take part in the government of our country. Every adult should be allowed to choose their own leaders.
- 22. **Social Security.** We all have the right to affordable housing, medicine, education, and childcare, enough money to live on and medical help if we are ill or old.
- 23. **Workers' Rights.** Every adult has the right to do a job, to a fair wage for their work, and to join a trade union.
- 24. The Right to Play. We all have the right to rest from work and to relax.
- 25. **Food and Shelter for All.** We all have the right to a good life. Mothers and children, people who are old, unemployed or disabled, and all people have the right to be cared for.
- 26. The Right to Education. Education is a right. Primary school should be free.
- 27. **Copyright.** Copyright is a special law that protects one's own artistic creations and writings; others cannot make copies without permission. We all have the right to our own way of life and to enjoy the good things that art, science and learning bring.
- 28. **A Fair and Free World.** There must be proper order so we can all enjoy rights and freedoms in our own country and all over the world.
- 29. **Responsibility.** We have a duty to other people, and we should protect their rights and freedoms.
- 30. No One Can Take Away Your Human Rights.



"Thou shalt not be a victim. Thou shalt not be a perpetrator. Above all, thou shalt not be a bystander."

> - Holocaust Museum, Washington, D.C.

3.3 Empower Yourself: Know Your SEXUAL RIGHTS!

Source: Kempner, Martha and Rodriguez, Monica (2005). Talk about Sex. Sexuality Information and Education Council of the United States (SIECUS). Retrieved 2011, from <img.thebody. com/siecus/pdfs/TalkAboutSex.pdf>

Every human being has basic rights. Yet young people are often made to feel as if these rights do not apply to them. As a young person, it is important for you to have a clear understanding of all of your human rights so that you are empowered to stand up for yourself when you need to.

* You have the right to accurate information about sexuality.

Young people often have difficulty accessing clear and accurate information about their bodies, sex, reproductive health and rights, relationships, gender identity, pregnancy, sexual orientation, condom negotiation, and STIs including HIV and AIDS.

* You have the right to decide how to express your sexuality.

Sexuality is a fundamental part of who you are as an individual. Everyone has the right to express their sexuality as they please- through the clothes they wear, the way they dance, the places they choose to hang out, and the way they interact with other people, etc. It is important to remember however, that we do not have control over how other people react to this expression.

* You have the right to make decisions about sexuality.

Throughout your life you will be faced with many decisions about sexuality. For example, if and when to become romantically involved with another person, what activities you are comfortable doing with that person, how you want to be treated in a relationship, how you look after your sexual health and protect yourself from STIs, if and what types of birth control you will use, etc.

* You have the right to protect yourself from pregnancy and STIs, including HIV and AIDS.

All sexual activities involve some level of risk. You have the choice to decide how much or how little risk you are willing to take. You may chose to be abstinent; to only engage in sexual actives after you and your parter have been tested for STIs; to use condoms every time.

***** You have the right to say no to unwanted touch of any kind.

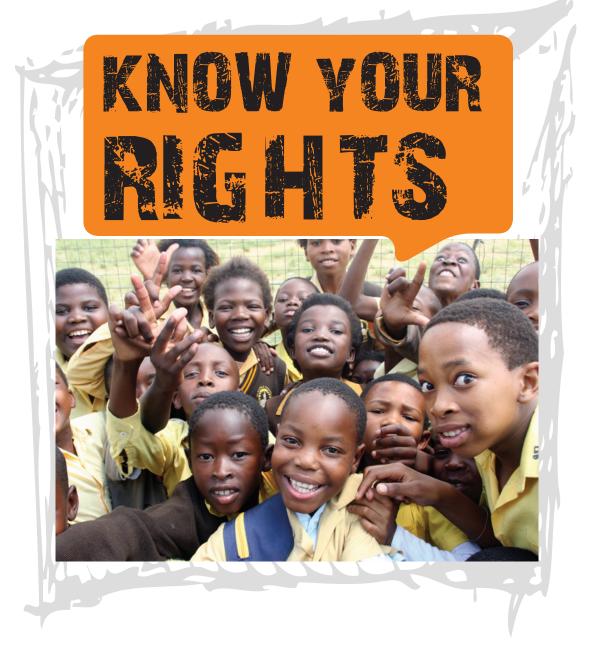
No one has the right to touch you without your permission. You have the right to tell someone to stop touching you if you do not feed comfortable- even if they have touched you in a similar way before. If you have experienced unwanted sexual touch, abuse or assault of any kind, you have the right to tell someone that can help you. Remember that unwanted touch of any kind is not your fault.

* You have the right not to be pressured into sexual activity or being physical with someone else.

Today peer pressure plays a large role in making young people feel as though they should engage in sexual activity even if they are not ready. You have the right to choose what, if any, behaviors you are comfortable participating in. You should expect that your friends and partners will respect this decision.

* You have the right to stop being physical or sexual with a partner at any point.

At any point while participating in consensual sexual activity, you have the choice to stop if you no longer feel comfortable, or to continue. Even if you have done something with this partner previously, it does not mean that you have to do it again. You have the right to expect that your partner will be respectful of your choice.



3.4 HIV and Human Rights: What's the link?

HIV and AIDS, like cancer, heart disease and malaria, is a killer disease. The difference, however, is that not only does HIV affect the physical health of individuals, but it also affects them mentally, emotionally and socially- how they are treated by others, and how they treat themselves. It is said that the stigma and discrimination attached to the virus is often worse the the virus itself, and equally equally destructive. People living with HIV often suffer numerous human rights violations as a result of stigma (self and enacted) and discrimination. This increases suffering while perpetuating the epidemic. Individuals are less likely to access counseling, testing, treatment and support due to fear of being stigmatized and discriminated against, and confidentiality being breeched. They are in turn denied their human rights.

Promoting human rights plays a vital role in reducing the spread of HIV through breaking down the existing barriers of discrimination and intolerance. Teaching about human rights can help to educate and empower individuals and communities to respond to HIV, and increase support to those vulnerable populations, as well as those infected and affected.

3.5 The legal and ethical issues relating to HIV and AIDS and young people are brought about by:

- Fear and stigmatization.
- ♣ Loss of confidentiality.
- ♣ Lack of access to youth friendly health services- testing, treatment & support.
- ♣ Lack of accurate, clear and non-judgement information about HIV, STIs & SRHR.
- ♣ Lack of power to refuse unwanted sex.
- Lack of knowledge on how to report sexual abuse.

3.6 The Human Rights most relevant to HIV and AIDS include:

- Non-discrimination.
- Equality before the law.
- Right to liberty and security.
- Right to health.
- Right to freedom of expression.
- Right to freedom from inhuman and unjust treatment.
- Right to marry and found a family.
- Right to education.
- Right to work.
- Rights of children.

Section 4: Addressing Stigma and Piscrimination

"We can fight stigma. Enlightened laws and policies are key. But it begins with openness, the courage to speak out. Schools should teach respect and understanding. Religious leaders should preach tolerance. The media should condemn prejudice and use its influence to advance social change, from securing legal protections to ensuring access to health care." - Ban Ki-moon, Secretary-General of the United Nations

Objective:

* To explore the strategies for overcoming stigma and discrimination among youth.

4.1 What is the role of young people in fighting stigma and discrimination?

As seen throughout this toolkit, HIV-related stigma and discrimination severely impact the fight against the HIV and AIDS epidemic. Fear of discrimination will often prevent people from seeking treatment or from disclosing their HIV status. People known to be or suspected to be infected or affected with HIV can be turned away from healthcare services, schools, employment, or refused entry into another country. In some instances, they may be forced out of their home or community, and rejected by their friends and colleagues.

4.2 Strategies for Overcoming Stigma and Discrimination among Youth:

- Education. Education. Education. People, infected or not, often lack education on modes of transmission. Fear of being infected via casual contact results in stigma and discrimination. Educating youth on how the virus is transmitted and how it is not is an important strategy to help them feel more comfortable interacting with people infected or affected with HIV. Young people can in turn share this knowledge with their family and community.
- * Young people often lack knowledge of their Human Rights, including their sexual rights. Promoting education of these rights is fundamental to having empowered youth capable of challenging the discrimination, stigma, abuse and denial that they encounter.
- * Leadership skills training is important for helping young people to translate the information that they have learnt to their friends, family and community.
- Advocacy. After comprehensive education and leadership training has been delivered, young people have the capacity to challenge legislations that affect them. For example, access to safe, youth friendly health care services.
- Build self-esteem and confidence. Self esteem poses a major threat, particularly for young people, in standing up for themselves, their rights, as well as the rights of others being subjected to stigma and discrimination. Increasing the self esteem and confidence of young people supports a community environment where people feel empowered to take care of each other and stand up for each other when human rights are being violated.



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