FACT SHEET
HIV Testing and Treatment
HIV Testing and Treatment

⭐ Knowing your status will empower you to protect your body, your health and your partners.
⭐ Regular testing every 3 to 6 months helps keep you informed of your status.
⭐ If you are pregnant, knowing your status is necessary to protect your health and the health of your baby.
⭐ If you are planning on becoming pregnant then you should first get tested because starting treatment early reduces the chances of transmitting HIV to your baby.
⭐ Testing is an important part of HIV prevention.

(Treatment Action Campaign, TAC)

What’s involved in HIV testing?

Consent: To give permission or approval (WordSmyth)
- Testing is voluntary. Your doctor or nurse needs your permission to test for HIV.
- Consent for an HIV test may be given by a child if they are if they are 12 years of age or older. A child under the age of 12 can consent if they are “sufficiently mature”. (Human Sciences Research Council)
- Children under the age of 12 who are not “sufficiently mature” may have consent given by a parent, caregiver or the provincial Head of the Social Department as long as it is in the best interests of the child. (Human Sciences Research Council)

Confidentiality: Communicated only in private (WordSmyth)
- We all have the right to private testing.
- Health workers must not tell anyone if a person has taken an HIV test.
- No person may disclose a person’s HIV status without consent.

Counselling: Help, advice and support given by an authority or qualified person (WordSmyth)
- We are entitled to pre- and post- test counselling.
- Counselling provides us with important information and psychological support before and after an HIV test.
- If the test is positive, a counsellor is there to support us. It can be scary to discover this result, but a counsellor should remind us that HIV is manageable and that many people living with HIV enjoy long and healthy lives with treatment. A counsellor is there to offer a variety of support resources and can discuss beginning HIV treatment as soon as possible.
- If the test is negative, then a counsellor can provide us with information to continue preventing HIV transmission, as well as when to get tested again.

(World Health Organization)

HIV testing options

- **Rapid HIV testing** is commonly offered at clinics and hospitals. The rapid test involves taking a pin prick of blood from your finger. These tests detect antibodies that the immune system produces against the virus. The results take less than 20 minutes to come back.
- **HIV self-testing** is a process in which a person uses a sample of their saliva or blood-finger-prick to perform a test and interpret the result. People with positive results are advised to go to a health clinic to confirm the result, receive counselling, treatment and care services. Self-tests are available in some pharmacies in South Africa. Learn more about HIV self-testing here: World Health Organization

Remember: It’s recommended to wait 3 months after potential exposure to an HIV infection to take an HIV test. This is because it can take 3 to 12 weeks after exposure to HIV for a test to detect HIV. This is called the window period. During the window period a person can be infected with HIV and be very infectious but still test HIV negative.

(iBase)
**Fact Sheet H&T**

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**MythBusters: HIV testing**

**Myth:** “If you’re getting tested that means you’re cheating on your partner”.

**Fact:** Testing for HIV is an act of prevention and self-care. When someone gets an HIV test, they are looking after their personal health and the health of their partners. When we assume that only people who cheat get tested, we’re discouraging people (and ourselves) from seeking care. *(amfAR)*

**Myth:** “I am monogamous, in an exclusive relationship with one partner, so I don’t need to be tested”.

**Fact:** Monogamy does not automatically protect you from HIV. Do you really know the sexual history of all your past partners (or your partner’s past partners)? Getting tested together is a great option for partners to support each other’s healthy, loving and sexual relationship. Monogamy can reduce the chances of being exposed to HIV, but getting tested is the only way to know your and your partner’s HIV status. *(HIV Beta Version)*

**Myth:** “I can tell if someone is HIV positive just by looking at them”.

**Fact:** People can be infected with HIV for more than 10 years without showing signs or symptoms. Even if a partner looks healthy, it is important to talk about each other’s HIV status and get tested regularly. A person’s HIV status can only be determined through an HIV test. *(amfAR)*

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**Let’s Talk About Treatment**

**HIV treatment 101:**
- Treatment is free if you go to a clinic.
- Antiretroviral therapy (ART) is a combination of antiretroviral (ARV) drugs to treat HIV.
- ART suppresses the HIV virus, stops the progression of the disease and helps prevent transmitting the virus.
- Treatment can help people living with HIV to live long, healthy lives.
- Treatment is not a cure for HIV.
- The medication is only effective if taken regularly. Even if people living with HIV feel healthy, adherence is vital to suppress the virus. Learn more about why adherence is important [here](https://www.amfar.org/). *(UNAIDS)*
- When someone is diagnosed HIV positive, health workers are advised to offer HIV treatment to that person as soon as possible.

**Staying healthy on treatment:**
- Avoid smoking
- Avoid alcohol
- Stay active and exercise
- Practice safer sex to prevent contracting or transmitting other sexually transmitted infections (STIs), hepatitis or other strains of HIV.
- Consult your doctor or nurse about using contraceptives and ARVs that do not interfere with each other. Some ARVs containing ritonavir can make certain contraceptives less effective. Learn more [here](https://www.k4health.org.za/). *(K4Health Family Planning)*
• PEP is short for post-exposure prophylaxis.
  Post = after
  Exposure = a situation where HIV enters someone’s body (e.g., during sex without a condom or by sharing needles or injecting equipment)
  Prophylaxis = disease prevention

PEP is a short-term anti-retroviral (ARV) treatment that reduces the likelihood of HIV infection after exposure to HIV-infected blood or sexual contact with an HIV-positive person.

PEP should be taken no later than 72 hours after exposure.
PEP must be taken once or twice a day for 28 days.
PEP is not a cure for HIV.
PEP is an emergency treatment to prevent HIV, only to be used when all other methods of HIV prevention have failed.
PEP is effective, but not 100%.
People eligible for PEP should receive counselling and support to talk about risk of infection, pros and cons of PEP, side-effects and adherence counselling.

Who is eligible for PEP?
• According to the Southern African HIV Clinicians Society, PEP should be offered and initiated as early as possible to all individuals who have been exposed to possible HIV infection. This includes but is not necessarily limited to:
  • Victims of rape or sexual assault.
  • People who may have been exposed during consensual sexual contact with an HIV-positive person.
  • People who are exposed to blood or bodily fluids at work.
  • People potentially exposed through needles.
  • People who are already HIV-positive should not take PEP.
  • Doctors will consider the patient’s exposure to HIV, and will provide testing to the source of the HIV exposure, if possible.

For example: Lisa wants PEP because the condom came off during sex with John. John does not know his HIV status and may have exposed Lisa to HIV. The doctor will ask John to get tested to see if he is HIV positive and Lisa is at risk of HIV infection. But if testing John is not possible, PEP is still an option for Lisa.

Fluids that Transmit HIV

HIV is not spread easily. Only certain body fluids from a person who has HIV can transmit HIV:
• Blood
• Semen
• Pre-seminal fluid (pre-cum)
• Rectal fluids
• Vaginal fluids
• Breast milk

These body fluids must come into contact with a mucous membrane or damaged tissue or be directly injected into the bloodstream (by a needle or syringe) for transmission to happen. Mucous membranes are found inside the rectum, vagina, penis and mouth.
RADIO PRODUCTION GUIDE
HIV Testing and Treatment
**HIV Testing and Treatment**

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(Treatment Action Campaign, TAC)

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(World Health Organization)

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Remember: It’s recommended to wait 3 months after potential exposure to an HIV infection to take an HIV test. This is because it can take 3 to 12 weeks after exposure to HIV for a test to detect HIV. This is called the window period. During the window period a person can be infected with HIV and be very infectious but still test HIV negative.

(iBase)
MythBusters: HIV testing

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• Consult your doctor or nurse about using contraceptives and ARVs that do not interfere with each other. Some ARVs containing ritonavir can make certain contraceptives less effective. Learn more here. (K4Health Family Planning)

Find out more about what people are saying and debating concerning self-testing in South Africa here. (Health-E News)
**What’s PEP?**

- PEP is short for **post-exposure prophylaxis**.
  - **Post** = after
  - **Exposure** = a situation where HIV enters someone’s body (e.g., during sex without a condom or by sharing needles or injecting equipment)
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Preparing for the show

Choose an angle

Ways to talk about testing and treatment

- Obstacles that prevent people from getting tested
- Young people’s access to testing and treatment in our community
- What is PEP and is it available in your community’s clinic?
- I’m HIV positive - now what?
- Living positively

Resources in South Africa

- National AIDS Helpline 0800 012 322
- Info4Africa is an organisation that has a directory of HIV services in South Africa. Find and list the organisations in YOUR community that offer support to people infected and affected by HIV.
- If you are feeling sad or depressed and want to talk to someone, LifeLine’s number is 0861 322 322.

Internet resources

- Exposed to HIV? It’s time to talk PEP
- The Art of Living Positively
- Youth Voices: Nolusindiso’s Story
- Empowered: Stephanie
- Empowered: Cristina
- Personal Stories from People Living with HIV

Find different ways to talk about the topic and structure your show outline.
Vox Pop
Vox Pop aim: To get many opinions on one topic.
Who do you talk to: Anyone in the community.

Question: Do you know what PEP is?

Audio commentary
Audio commentary aim: To get people’s opinion about a topic that they care deeply about.
Who do you talk to: Ask a young person in the community, without exposing their identity, to explain what they would do if they were in a situation where they may have been exposed to HIV.

Audio profile
Audio profile aim: To get a first person account of someone’s experience, passion and journey. Audio profiles often aim to inspire.
Who do you talk to: Someone in the community who is living positively with HIV and can talk about how they stay healthy. OR talk to a nurse/doctor who can talk about their experiences supporting and counselling HIV positive people to live positively.

Questions to ask to get the person thinking before they record their profile:

⭐ How has your life changed since learning about your HIV status?
⭐ What does your support network look like?
⭐ How do you practice self-care?
⭐ What brings you joy?
⭐ What are your goals and ambitions for the future?

PSA
The aim of a PSA: To create a public awareness message.

Voice 1: Last night, when the condom broke I didn’t know what to do…
Voice 2: Last night, I thought I was fine with not using a condom…
Voice 3: Last night, I shared a needle with a stranger…
Voice 4: Last night, I was sexually assaulted…
All Voices: Now I’m scared I’ve been exposed to HIV.

Character: We have the right to access information and services for emergency HIV prevention. If you’ve been exposed to HIV go to a hospital or clinic within 72 hours and ask your doctor or emergency care provider about PEP. That’s P - E - P, PEP.
Use your produced radio features, your research, and the suggested script and questions to write your own script.

Suggested questions for your interview with someone who knows about testing and treatment options, especially PEP (doctor, nurse, emergency care provider).

- What is PEP?
- Who can receive PEP?
- Does PEP cure HIV?
- What steps does a doctor or emergency care provider take to decide whether a person should be given PEP?
- Can you describe the treatment process?
- What are the side effects of the medication?
- How effective is PEP?
- How much does PEP cost?
- Can a person take PEP every time they have unprotected sex?
- Is PEP available in our community clinic? If not, why?
- What should someone do if they think they are being unfairly turned away from treatment at the hospital?

[INTRO:]
Host 1: It’s just gone [TIME] and you’re just in time for the [NAME OF SHOW] on [RADIO STATION]. My name is [NAME]...
Host 2: And my name is [NAME], and today’s show is all about HIV testing and treatment!
Host 1: That’s right, we’ll be talking about the importance of young people accessing testing and treatment. Let’s be real - there’s a lot of fear, stigma, even indifference out there about about HIV, which makes it hard for young people to talk openly and learn about our testing and treatment options. Testing and treatment is about care - caring for ourselves, our partners, our community. We need the information to make the choices that are right for us!
Host 2: We’ll be focusing on the emergency HIV prevention treatment called PEP. This includes conversations about who needs it, what it does and if it’s available in our community clinics.
Host 1: Let’s hear more about what people have to say about PEP.
[PRESENT WHO IS BEING INTERVIEWED]
[PLAY THE INTERVIEW]

[Outro:]
Host 1: Today we’ve learnt so much about PEP! Imagine how important it would be to know about this treatment if you were exposed to HIV and risked infection.
Host 2: Or if a friend was in that position, I’d want to help them act quickly. We gotta take care of ourselves and support each other - that’s what testing and treatment is all about, hey?
Host 1: Next week on [DAY] at [TIME] we’ll be talking all about [NEXT WEEK’S SHOW TOPIC]. Until then, it’s bye from us!

Once you’ve finalised your script, produced your radio features and finalised your “show clock” it’s time to go live on air!
You must always introduce your show and radio features. Then once you’ve played your features, have a concluding statement for each one. Don’t forget a final conclusion for the very end of the show.

Use links (facts, tips, did you knows, music) to glue it all together.

Now write your radio script
Outreach Guide

Preparing for the show

Choose an angle

How to present your outreach activity

- Obstacles that prevent people from getting tested
- Young people’s access to testing and treatment in our community
- What is PEP and is it available in your community’s clinic?
- I’m HIV positive - now what?
- Living positively

Different ways to talk about: What is PEP and is it available in your community’s clinic?

- Defining PEP
- Rights of access
- Stigma at the hospital
- PEP as an important last resort

Resources in South Africa

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- Empowered: Cristina
- Personal Stories from People Living with HIV

Use your outreach formats and your research to write your own script. Here is an example of part of a script. Use it as a guide to create your own script for your outreach activity.

Find different ways to talk about the topic and structure your show outline.
Outreach Guide

Outreach formats

Quiz
Quiz aim: To test knowledge of the audience through a competition with prizes for the winner(s).

Question:
- What is PEP and is it available in your community’s clinic?
- What is consent?
- What is confidentiality?
- Is HIV and AIDS the same thing?

Debate
Debate aim: A debate is a discussion between two people who have opposite opinions on an issue.

Debate statement: “Only people who cheat in relationships get HIV.”

Guest speaker
Guest speaker aim: This is someone you have invited to speak at the event to provide facts or meaning to the topic under discussion.

If you choose a medical professional as a guest speaker, here are a few example questions for the speaker to think about ahead of the outreach:

- In your experience do many people know about PEP? Have you ever given it to someone at your place of work?
- In which ways is PEP an important HIV prevention medication for our community?
- What must health care workers do when a patient thinks they’ve been exposed to HIV?
- What advice do you have for HIV positive people in terms of keeping themselves healthy?
- What advice do you have for those who find themselves in the support network of an HIV positive person?

Panel discussion
Panel discussion aim: A panel discussion involves a group of people discussing one topic in front of an audience. There is usually time for questions from the audience afterwards.

Example of an opening question to the panel: What do you think are the ways to “Live Positively” for an HIV positive person?

Interview:
Interview aim: An interview is a one-on-one conversation where questions are asked by the interviewer and answers are given by the interviewee.

Examples of questions to someone who is HIV positive and has agreed to disclose publically and be interviewed:

- Please tell us about your experience of getting back a positive test result.
- What are the things in your life that have changed the most since you learned you were HIV positive?
- How do you practice self-care?
- What are your goals and ambitions for the future?
- What does your support network look like?

Impact Jingle
Impact Jingle aim: A jingle is a short song or tune that is easy to sing along to and remember, and it has a clear message.
How to present your show

Suggested questions for your interview with someone who knows about testing and treatment options, especially PEP (doctor, nurse, emergency care provider).

- What is PEP?
- Who can receive PEP?
- Does PEP cure HIV?
- What steps does a doctor or emergency care provider take to decide whether a person should be given PEP?
- Can you describe the treatment process?
- What are the side effects of the medication?
- How effective is PEP?
- How much does PEP cost?
- Can a person take PEP every time they have unprotected sex?
- Is PEP available in our community clinic? If not, why?
- What should someone do if they think they are being unfairly turned away from treatment at the hospital?

Use your outreach formats and your research to write your own script. Here is an example of part of a script. Use it as a guide to create your own script for your outreach activity.

[Intro:] Host 1: Hello, welcome everyone! Thank you all for being here at the [NAME OF VENUE] today. My name is [NAME OF HOST 1] and I am a [TITLE OF HOST] from [NAME OF ORGANISATION/GROUP]

Host 2: And my name is [NAME], and today's outreach is all about HIV testing and treatment!

Host 1: That's right, we'll be talking about the importance of young people accessing testing and treatment. Let's be real - there's a lot of fear, stigma and even indifference out there about HIV that makes it hard for young people to talk openly and learn about our testing and treatment options. Testing and treatment is about care - caring for ourselves, our partners, our community. We need the information to make the choices that are right for us!

Host 2: We'll be focusing on the emergency HIV prevention treatment called PEP as well as how you can support an HIV positive person and the many ways to live positively!

Host 1: First, let's hear more about what PEP is all about.

• What is PEP?
• Who can receive PEP?
• Does PEP cure HIV?
• What steps does a doctor or emergency care provider take to decide whether a person should be given PEP?
• Can you describe the treatment process?
• What are the side effects of the medication?
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[Outro to Interview]

Host 1: Today we’ve learnt so much about PEP! Imagine how important it would be to know about this treatment if you were exposed to HIV and risked infection.

Host 2: Or if a friend was in that position, I’d want to help them act quickly. We gotta take care of ourselves and support each other - that’s what testing and treatment is all about!

Host 1: Now that we have your attention, I’d like to ask you, the audience, what HIV testing options are out there?

[HOSTS LET AUDIENCE RESPOND IN SHORT ONE SENTENCE ANSWERS]

Host 2: Wow, there’s so much to learn from each other today.

[Impact Jingle]

Now lets test your knowledge with Quiz Time! This is how it works.

[Host 2 explains the quiz rules, and plays knowledge quiz]

[Quiz Outro]

Host 1: Wow! Thanks guys for participating in our knowledge quiz! Are you all having a good time? Well there is more to look forward to! Next up we’d like to invite 2 brave souls to the front to take part in a debate.

Host 1: Hands up if you’d like to volunteer to be part of the debate!

[Hosts explain the rules of the debate and call up 2 volunteers]

[Live debate]

[Hosts reflect on the debate topic and outcome]

[Impact Jingle]

[Hosts give final comments on topic and give thanks to the audience and a reminder of how to stay in touch online, etc.]

Host 2: We have performance by [NAME OF ARTIST]. Please give him/her/them a warm welcome.
Outreach Outline:

An outreach outline is a map to help you stay on track during your event. It is a list of the items and the order in which they will happen in the outreach activity. Below is an example of an event that is one hour long.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Music</td>
<td>5 min</td>
</tr>
<tr>
<td>Intro</td>
<td>5 min</td>
</tr>
<tr>
<td>Intro to Interview</td>
<td>2 min</td>
</tr>
<tr>
<td>Interview</td>
<td>7 min</td>
</tr>
<tr>
<td>Outro of Interview</td>
<td>1 min</td>
</tr>
<tr>
<td>Audience Response</td>
<td>5 min</td>
</tr>
<tr>
<td>Impact Jingle</td>
<td>30 sec</td>
</tr>
<tr>
<td>Intro to Quiz</td>
<td>1 min</td>
</tr>
<tr>
<td>Quiz</td>
<td>5 min</td>
</tr>
<tr>
<td>Outro to Quiz</td>
<td>1 min</td>
</tr>
<tr>
<td>Intro to Debate</td>
<td>3 min</td>
</tr>
<tr>
<td>Debate</td>
<td>10 min</td>
</tr>
<tr>
<td>Outro Debate</td>
<td>1 min</td>
</tr>
<tr>
<td>Impact Jingle</td>
<td>30 sec</td>
</tr>
<tr>
<td>Final comments from audience, hosts and goodbye</td>
<td>5 min</td>
</tr>
<tr>
<td>Intro to artist presenting final performance</td>
<td>5 min</td>
</tr>
</tbody>
</table>

Ethics and consent

This may be a sensitive topic for some, so make sure you inform your audience to respect those who share personal stories in the space.

When you create your outreach outline, be aware of the flow and the energy that certain activities generate. You don’t want to start with a bang and end on a whisper.

Remember to introduce each format and outro it by summing up what was said and thanking your guests who contributed to the format.