

Community Health Volunteer Update

A Newsletter From the APHIA II Western Project

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Understanding HIV Discordance

A couple is discordant when one partner tests HIV positive and the other tests HIV negative. It is possible for one partner to be negative because not everyone who is exposed to HIV becomes infected at the same time.

Each time a person has unprotected sex with an HIV-infected partner, he or she is exposed to HIV and at risk of HIV infection. Being exposed to HIV is not the same as being infected. When a person is exposed to HIV, he or she is either infected at that time or not infected. If someone is not infected, it does not mean that the person will never be infected. Some people will be infected the first time they are exposed to HIV, and others may be infected after many exposures. The more a person is exposed to HIV, the greater the risk that they will become infected.

There are many reasons why a person who is exposed to HIV may become infected with HIV or may not become infected with HIV.

Sexually transmitted infections (STIs): A person is more likely to be infected or re-infected with HIV if she/he is infected with an untreated STI. When a person with an STI engages in unprotected sex, HIV contained in the sexual fluids passes very easily. People with HIV and STIs are more likely to transmit HIV to others. People are more likely to become infected with HIV if they have STIs.

Amount of virus: The more HIV in the infected person's body, the more likely it is that he or she will pass HIV to a sexual partner. People with AIDS have high amounts of HIV in their body. People on antiretroviral drugs (ARVs) have lower amounts of HIV but can still pass HIV to partners.

Recent infection with HIV: When someone is recently infected with HIV, he or she will have a higher amount of virus in his or her body. This increases the chance of passing HIV to others. It is important to protect yourself and your partner every time you have sex.

Amount of sexual activity: Each time an uninfected person has sex with someone who has HIV, he or she is at risk of getting HIV. The more exposure to HIV he or she has, the more likely it is that he or she will become infected.

Injury of the genital areas: Partners with cuts or sores on the genitals are more likely to become infected with HIV.

Window period: Some couples may have different test results because one partner is in the window period. When a person is infected with a virus, the body produces antibodies to fight it. Antibodies are found in blood. When a person is given an HIV test, the test looks for HIV antibodies. If the body has antibodies to fight HIV, then the test is positive. However, it takes the body a little time to start producing antibodies to fight HIV. This time between being infected and making enough antibodies is called the window period.

It is possible for someone to test HIV negative during this window period because there are not enough antibodies. But that person is still infected with HIV and able to pass the virus to someone else.



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People who test HIV negative and have had unprotected sex during the past three months are advised to take another test in three months. During this window period, people should avoid being exposed to HIV.

Protecting partners

If discordant couples do not take steps to protect the negative partner from HIV, that partner has a very high risk of becoming infected. Couples can stay discordant by not having sex or always using condoms.

Key messages for discordant couples:

Go for HIV testing twice if you have had unprotected sex in the last 3 months. An HIV test may be negative if a person is tested during the window period. To ensure the HIV status is negative, people who have had unprotected sex in the last 3 months before their first HIV test should have another HIV test 3 months later to verify their negative result. During this waiting time, they must avoid being exposed to HIV.

Practice safe sex. Protect the negative partner from HIV by not having sex or by using condoms every time you have sex.

The negative partner should be tested regularly. Negative partners face a high risk for HIV infection and should be tested for HIV each year.

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Living With Discordance: Gerald and Ruth's Story



Ruth and Gerald are married with four children. Ruth started feeling sick early last year and was constantly bedridden. Her husband advised her to go to the hospital for a check-up. She

visited St. Mary's hospital in Mukumu where she was tested and found to be HIV positive.

Ruth remembers when she was tested. "When I first discovered my status I thought it was the end of the world. I was very bitter and angry. I thought of my children and thought the only option was to either hang myself or run away from the family, but the nurses counselled me and encouraged me to be strong, accept my status, and live on."

"After I received my test results, the nurses talked to me and advised me to start taking drugs to prevent opportunistic infections and eat well. I was immediately enrolled on antiretroviral drugs, and I have been taking them. My health has now improved, and I carry out my duties as normal."

When Ruth returned home, it was very difficult for her to talk with her husband about her results. She would try to talk with him about HIV, but he brushed off the subject. She kept insisting, and he agreed to go for testing at a community outreach.

Gerald's test was negative. He knew his wife was positive, so he did not believe the results. Gerald remembers that it was very difficult to talk with her about their different HIV results. "It took me three days on my own to decide what to do. But I thought back on where we have come from and did not want to abandon her."

After Gerald told Ruth about his status, they decided to go for counselling together. "I encouraged her to continue visiting the hospital for further check-ups and support so that she can remain strong and supportive to the family," recalls Gerald.

Both her husband and children have been very supportive of Ruth, always reminding her to take her ARVs at the right time, encouraging her to go for seminars on HIV, doing the household chores for her, and reminding her to be strong.

"Whenever we want to engage in sexual intercourse, we use a condom just for both of us to be safe."

"Whenever we want to engage in sexual intercourse, we use a condom just for both of us to be safe," explains Gerald. "Also, we don't want to expand our family. The four children we have are enough."

"I now believe that antiretroviral therapy will help me remain strong and live to see my children grow up," says Ruth.

Discordance: A couple is discordant when one partner is HIV positive and the other partner is HIV negative.

Questions and Answers:

Answers to Questions From Community Health Volunteers Like You

If both parents are HIV infected, can they give birth to a child who is not HIV infected?

Yes. Most babies born to HIV infected mothers will not become infected with HIV, but some will.

There are ways to reduce the risk of mother-to-child transmission of HIV, such as giving mothers and babies ARV drugs and appropriate infant feeding. It is important for pregnant women to know their status. If they are positive, they should go for prevention of mother-to-child transmission (PMTCT) services so they can reduce the risk of HIV to their baby.

If a father is positive but the mother is not, the baby cannot be infected. However, the mother is at risk of infection, and it is important that she protect herself and her baby. Fathers can use condoms or abstain from sex to reduce the risk of infection to mothers and children. If the mother becomes infected while pregnant or breastfeeding, the risk of transmitting HIV to her baby is very high. Exclusive breastfeeding for 6 months is the best way for women in our community to feed their babies, even for women who are HIV positive.

Can a person become infected with HIV through saliva?

No. A person cannot be infected with HIV through contact with saliva. HIV can only be passed through blood, semen, vaginal fluids, and breastmilk.

HIV has been found in very low amounts in saliva and tears from some people living with AIDS. It is important to understand that finding a small amount of HIV in a body fluid does not mean that HIV can be transmitted by that body fluid. Contact with saliva, tears, or sweat has never been shown to result in transmission of HIV.

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Promoting Health Services in Mt. Elgon

Bilha Naliaka, 25, is serving her community in Mt. Elgon as a community health volunteer (CHV). Members of this conflict-torn community face difficult health challenges that have been made worse by the insecurity. Traditional beliefs and gender norms contribute to poor health. Most residents believe that diseases are brought about by *kupiga mafupa*—witchcraft—and seek traditional treatment.

Bilha told us her story.

Just three days after being trained as a CHV by APHIA II Western, I was with a woman in prolonged labour with health complications. Traditional birth attendants had been assisting her for hours without success, and her situation seemed to be getting worse. I convinced them to take her to Cheptais Health Centre.

She later delivered a healthy baby. My energies are currently directed toward reducing the high child-mortality rate in the community. We bury two to four children every week.

I organize outreaches in the community with health facilities and other stakeholders, and the response has been encouraging. I have started health dialogue groups in my home area in Kisongo sub-location.

I conduct home visits with mothers and share information and convince them to use health services alongside their children. I also visit market places, churches, funerals, youth groups, provincial administration, and barazas, encouraging people to embrace healthy behaviours.

Most members of my community have realized the importance of health services, and large numbers are now using the services at Cheptais Health Centre. Even mothers are delivering at the health facility unlike before, when they turned to traditional births attendants and did not visit the antenatal clinic.

Over the past two years I have seen many positive changes in my community.



Bilha at an outreach in her community

As a CHV, Bilha helps her community adopt healthier behaviours and use health services. She is recognized by her community for her passion and dedication. She is committed to offering health information to youth, women, and men and believes people can change if you talk with and listen to them. How can you encourage people in your community to access health services? Have you tried any of Bilha's approaches?

(Continued from page 2)

What is the difference between HIV-1 and HIV-2?

- HIV-1 and HIV-2 are types of HIV. HIV-1 is the most common. They are transmitted in the same way and both can cause opportunistic infections and AIDS.

People infected with HIV-2 develop symptoms more slowly, and the symptoms are milder. HIV-2 is mostly seen in West Africa, although there are cases in Mozambique. Not all of the drugs used to treat HIV-1 can treat HIV-2.

What is the relationship between HIV and tuberculosis (TB)?

Some people get sick only with TB, some people get sick only with HIV, and some people get sick with both TB and HIV at the same time. Having TB does not mean that someone has HIV, and having HIV does not mean that someone has TB.

TB is an opportunistic infection that attacks the body when the immune system is weak. HIV makes the immune system weak, so a person who is infected with HIV is more likely to become sick with TB. In HIV infected people, TB causes the amount of HIV to increase. TB is the most common cause of death among people with HIV.

However, TB is curable even if the person is infected with HIV, but the person must go to the health facility early for screening and treatment. TB testing and treatment are free.

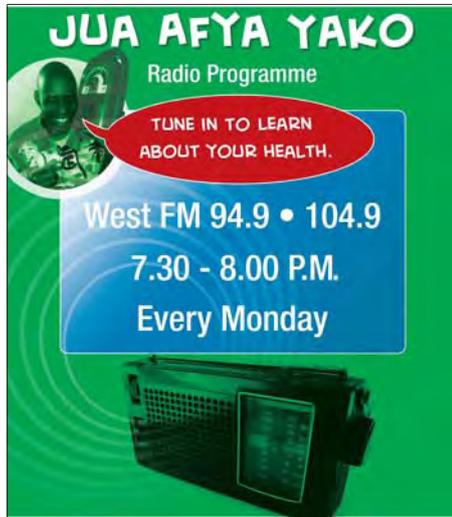
If participants in your groups have questions and you do not know the answer, write them on your reporting form. The answers may appear here.

For more answers, don't forget to check out the background notes of each chapter in your *Community Health Volunteer Manual*. It's full of detailed information about lots of health issues!

***Jua Afya Yako* Radio Programme is on West FM**

Jua Afya Yako is a 30-minute radio programme that started in July 2008. The weekly radio show is broadcast in Kiswahili every Monday evening from 7:30 pm to 8:00 pm on West FM 94.9 and 104.9.

Jua Afya Yako promotes ways for both the young and the old to approach their lives with less risk and remain healthy. The programme shares information on health issues in the region including HIV/AIDS, malaria, reproductive health, TB, and maternal and child health.



JUA AFYA YAKO
Radio Programme
TUNE IN TO LEARN ABOUT YOUR HEALTH.
West FM 94.9 • 104.9
7.30 - 8.00 P.M.
Every Monday

While the key theme is on health, *Jua Afya Yako* also seeks to sensitize listeners on gender equality, the importance of parents talking with their children about sex and sexuality, and ways to improve their lives.

Jua Afya Yako can be heard throughout the Western province. It will be on air through July 2010.

Jua Afya Yako features interviews with health experts and community members, skits, drama, poems, and music. The programme also engages the community throughout Western Province by visiting various parts to talk with listeners and get their opinions on the health topics being discussed. The voices of women, men, girls, and boys from the community can be heard during the programme.

Some episodes are broadcast live in the studio, allowing listeners to call in to ask guest speakers questions, give suggestions, and share their opinions on the topic being discussed.



Jua Afya Yako features interviews with community members

Encourage members of your dialogue groups and communities to listen to the programme each week. You can discuss the topics in greater detail during your meetings. You can also suggest topics and ways for your dialogue group members to be featured on the show.

For more information

If you have questions or need more information on any of the health topics in this update, refer to your CHV manual. Each chapter has a background notes section that provides reference information to help you answer questions from members of your community.

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