

Volunteers for Peace 26th November – December 3rd 2006



Volunteers For Peace – Vietnam (VFP-VIET) is a non-profit, voluntary organization established in Vietnam since October 2005. VFP aims to promote international voluntary service as a mean of cultural and educational exchange among people, for peace, friendship and understanding and as an approach to address social problems.

VFP-VIET has been organizing a series of international work-camps and long-term voluntary placements with the participation of over 100 international volunteers. VFP's projects target disadvantaged communities in Vietnam and address various social problems in the country, including children and disability, victims of Agent Orange and war aftermaths, education, health and HIV/AIDS, environment protection and natural conservation, historical and cultural preservation, social work and community development.

During my time in Vietnam, I volunteered with VFP on their first-ever HIV Awareness work-camp. In a team of eight international volunteers (from America, Canada and Australia) as well as local Vietnamese helpers, we researched, prepared and presented information sessions to three universities on HIV; focusing on its transmission and prevention. We performed role plays to help explore issues of stigma and discrimination, conducted small discussion groups to allow students to voice their opinions and share experiences, introduced the ABC (Abstinence, Be Faithful, Condom Use) concept and taught practical skills of how to use condoms properly as a form of contraceptive and preventative strategy.

The international volunteers' ages ranged from 19 to 25 years of age; I was actually the second youngest. Amongst the group, there was a new high-school graduate, two biology majors with ambitions to study medicine, a geography major with plans to live in the South of France for three months to study the language and in the future hopes to work for the Canadian government in development work, and an

Australian who had spent the last 16 months teaching English in Japan. We also had amongst us the experience of a community outreach worker who primarily works with Asian communities in San Francisco. For some, Vietnam was their first overseas adventure; for others it was part of their world trip itinerary. It was an eye-opening experience just to be able to meet these people, hear their unique stories, learn from them and also work together on this project. No matter where we came from or how different our backgrounds, we all had a common interest in this particular work-camp. We were determined to dedicate our minds, passions and skills into a positive cause and what better way than to help other young people who are not as fortunate as ourselves, in Vietnam.



Overall, it was a fantastic experience – both having the opportunity to work with and exchange ideas with international and local volunteers as well as getting the chance to educate young people about important issues. It's an amazing feeling being able to empower others!

This work-camp actually commenced on the 20th of November, but due to my participation in the Good Pharmacy Practice workshop I wasn't able to join VFP until the work-camp's second week. Nonetheless, I felt I was still able to make a significant contribution to the project and learnt so much in such a short time!

Proposed Work Plan

VFP-VIET will set up an information booth in Beauty in Diversity Event with main focus on HIV/AIDS Prevention and promoting voluntary service. Volunteers will be the key actors in preparing and running all activities.

Before the event:

- *Volunteers will prepare for the information corner with materials collected from different sources. The work will include designing, erecting, decorating and preparing games and activities for the event.*
- *Volunteers will also help local organizer (preparing site, setting up stage, etc).*
- *Volunteers will visit some universities and schools, exchange with local students and discuss about HIV/AIDS and the way to stop the spread of the disease. Prepare yourself with basic information in this topic, especially the situation in your home countries.*
- *Some discussion and talk with people who are working in HIV/AIDS prevention will be organized to give volunteers basic understanding about the situation and problem and some basic skills in health education.*

During the event:

- *Volunteers will manage the information corner, try to deliver messages on HIV/AIDS prevention and volunteerism to visitors.*
- *Volunteers will also distribute leaflets and free condoms to targeted groups.*

Planning and Preparation

This was the first time VFP-VIET had ever run a HIV-AIDS related work-camp, so there was much to be learnt by both organizers and volunteers.

During the first week, Ms. Thu Anh, the Program Officer of Hanoi HIV/AIDS Program from (MCNV) the Netherlands Medical Committee in Vietnam, was invited to speak to the volunteers about the current HIV situation about Vietnam. She discussed the disease in detail (the causative virus, disease development, WHO staging etc) and talked about prevention strategies (safe syringe use, ABC concept etc). Although volunteers were asked to prepare and research HIV prior to arrival at the camp, this training session allowed volunteers to understand the problem at a local level and highlighted our important role in the prevention of HIV.

The international volunteers - who had all had prior knowledge about HIV and its prevention strategies, including safe sex (e.g. from school education programs) - were able to grasp the concepts easily and quickly; however for the Vietnamese volunteers it was quite an eye-opening experience. Many were very embarrassed by the talk of sex (some had a poor understanding of what it actually meant) and

condoms; and it took quite some time for even the local volunteers to become comfortable using and hearing such terms.

Having had an extensive experience in development programs and community education, Ms Thu Anh was also able to share some practical advice on effective communication skills, with particular emphasis on the use of role plays as a form of expressing ideas and information to audiences. VFP volunteers were given many resources with suggestions and techniques of this method of teaching.

Since VFP had never hosted a HIV awareness camp before, there was a heavy reliance on us as international volunteers to do a lot of the ground work independently and use our initiative. Although this seemed quite daunting at first, I think it gave us an opportunity to challenge ourselves, to stimulate our minds and creativity, and to work as a team. I think that this was a valuable learning and life experience in itself – to be able to work effectively and efficiently with limited time and resources, with people with vast backgrounds, skills and opinions.



We had several brainstorming sessions and meetings, as we tried to decide on the most appropriate way to deliver our presentation on HIV. We did not know much about our proposed audience other than that they would be university students who have studied English. We had to take into the account that they would not necessary

have much, if any, health science background and we did know the level of English competency. In the end, we decided on a multi-faceted approach; incorporating pedagogic teaching principles with interactive questions, thought-provoking role plays, a chance for discussion, use of visual aids (including Vietnamese translations where possible) and games.



Volunteers were expected to have prepared some materials for the work-camp, for example, printed information or pamphlets. However, once we had pooled our knowledge and resources, we still felt that there were some gaps that needed to be filled. Without ready access to a to the internet at Peace House, we were left with no choice but to walk in to town, which literally consisted of only a few stores along a dusty road with one internet café. We maximized our computer access time by not only researching on HIV but typing up our presentation plan, skits and questionnaire.



Never did I imagine that my 'cut & paste' skills would become so vital than that week with VFP! Our preparations also included preparing posters and props for our role plays. Our creative skills were out to the test as we had to decide on simple yet effective diagrams and best wording of posters, as well as Vietnamese translation of key ideas. I definitely enjoyed the fact that my artistic skills, however limited they are, were required and used for such a good cause!

I was also sent on a mission to buy two dozen cucumbers that we could use for the condom demonstration. They must not have been in season, because every market and fruit markets we went to didn't stock any! Eventually, we had to take the motorbike into town to the 'Big C' shopping complex to find what we were looking for.



After our final dress rehearsal the day before our presentations we were set and ready to go! Lights, camera, ACTION!

HIV Information Sessions

Introduction: We first introduced ourselves as volunteers from VFP, who were here to run an information session of HIV. We told the students that we were from four countries: Canada, America, Australia and Vietnam. We each introduced ourselves with a statement to help students guess where we came from;

*"My name is Madelaine. Where I live, in the summer time,
we like to have BBQs in the backyard. In my country you will find kangaroos"*
"My name is Michael. I like to eat hamburgers, french fries & drink Coca Cola"

Questionnaire: We had prepared a basic questionnaire for the students with YES/NO responses. Students were given ten minutes to answer the questions, before re-convening and discussion of the answers as a group.

HIV Facts: Questions 1 to 5 were fact based. One VFP volunteer was allocated to each question and responsible for creating visual aids (primarily in the form of posters) to help students understand the facts related to the question.



1. Can anyone get HIV?

Marty (Australia) explained that HIV is a worldwide epidemic. He prepared a histogram, which illustrated that the majority of cases are in Africa, however the disease is prevalent in the USA, Canada, Australia (even in the countries that the volunteers come from) and also in Vietnam. There was emphasis on the fact that also it may not seem that prevalent in society, HIV is a growing problem everywhere, however there are ways that we can protect ourselves and our families by prevention.

2. How can HIV be transmitted?

- a) Unprotected sex**
- b) Sharing needles**
- c) Breast feeding**
- d) Kissing**
- e) Mosquito bites**
- f) A toilet set**

Alex (Canada) explained that there are three main routes of HIV/AIDS transmission:

- (1) Unprotected sex
- (2) Blood (eg. sharing needles)
- (3) Pregnancy (during pregnancy, delivery or via breastfeeding)

HIV cannot be spread through close contact such as hugging, kissing or sharing food; nor through your sweat, breath or saliva.

By asking the students to raise their hands in response to the given options on the questionnaire as well as evaluated the hard-copies at the end of our session, we could see that there were some students who believed some of the common myths about HIV transmission, including mosquito bites. Majority knew that HIV could be spread by unsafe sex and needle use but many did not think HIV could be transmitted during pregnancy.

3. What services can condoms provide?

- a) Family planning**
- b) Preventing HIV/AIDS transmission**
- c) Limiting the risk of sexually transmitted infections**

Natalie (USA) explained that the use of condoms serves all the above purposes. Condoms are made of latex rubber, which is flexible yet strong enough to act as barrier, preventing body fluids and blood from mixing during sexual intercourse. This means that they can be used to prevent unwanted pregnancies, and reduce the risk the sexually transmitted diseases, including HIV.

4. Can you tell by looking at someone if they are infected with HIV?

“Generally speaking you cannot tell if a person has HIV. Few people show signs of being HIV positive. Symptoms often occur only once they begin to develop severe HIV infection called AIDS. This takes about five to ten years.

OK, so let’s take a look at what the HIV virus does to the body:

- 1) Before infection, the body is healthy and strong with lots of immune cells. These cells protect the body against disease and infection.*
- 2) If you contract HIV, for example through unprotected sex or sharing needles with someone with HIV, the virus enter the blood and kills the immune cells*
- 3) AID will eventually develop when the virus has killed so many immune cells that the body can no longer protect the body from any invading viruses and other bacteria*

This is the reason why AIDS patients become very ill with many infections, such as meningitis – which is an infection of the brain – and tuberculosis – which is an infection of the lungs. These are called opportunistic infections.

Some of the symptoms that HIV/AIDS patients will eventually develop include:

- *Extreme weight loss*
- *Unexplained diarrhea*
- *Chronic weakness*
- *Prolonged unexplained fever*
- *Fatigue*

Remember it takes many years before these symptoms will occur. So it is very important that if anyone thinks they may have contracted HIV to go get tested. However, we must understand that a positive HIV result is NOT accurately given until three to six months AFTER initial infection. So even BEFORE a positive result is detected, and long before symptoms appear, people are STILL infectious and can transmit HIV to others. This tells us just how important it is to protect ourselves and be safe, in particular when it comes to sex and, or using needles.”



It was challenging to try and explain how HIV affects the body in the simplest way, both verbally and pictorially, without making it inaccurate. After our initial dress rehearsal and subsequent session, we realised we had to modify our language even further to use the most basic to get our message across to maximise the understanding of our audiences. It was a chance to practice communication skills; after all, one of the major roles of pharmacists is being able to talk to a patient about their condition and subsequent pharmaceutical treatment in lay mans language.

5. HIV/AIDS can be cured. True or False?

Jamie (Canada) explained that there is no cure for AIDS. There are drugs that can slow down the HIV virus, and slow down the damage to the immune system but there is no way to get all the HIV out of the body once infected. In Vietnam, there is an insufficient amount of treatment doses to treat all AIDS patients, and that is why it is so important to prevent infection in the first place. There is an easy way to remember how:

- **Abstinence** – *Kiem Che Tinh Duc*: Abstain/Avoid/ Do not have sex at all
- **Be Faithful** – *Chung Thuy*: If you do have sex, have one partner only.
- **Condom Use** – *Dung Bao Cao Su*: If you have sex, whether it be with 1 or - in particular - with multiple partners, use a condom to prevent spread of STIs, including HIV



At this point in the presentation, Natalie demonstrated how to correctly use a condom, from opening, apply and removing a condom. Linh provided a step-by-step Vietnamese translation. VFP volunteers then guided students in practicing using the condoms on the cucumbers provided.

Role Plays: These skits written by and acted out by VFP volunteers. They were used to help explore the issues brought up by the second half of the questionnaire (personal or opinion based questions), with issues relating to stigma and discrimination of people living with HIV/AIDS (PLWHA), safe sex and HIV testing. After the role plays, students were divided into smaller groups and under the guidance of VFP volunteers discussed the plays, for example, if students agreed with the ending, reasons why the characters did what they did and shared any real-life experiences or other opinions.



SKIT ONE - STIGMA / FAMILY AND FRIEND

QUESTIONNAIRE

6. Would you tell your friends if a family member had HIV/AIDS?

7. Would you treat your friends differently if they had HIV/AIDS?

Would your friends treat you differently if you had HIV/AIDS?

1. Breaking the news to girlfriend

Guy - I love you but I have something to tell you...

Girl - What do you want to tell me?!

Guy - I have HIV...

Girl - *gasps* (stops holding hand) "Don't touch me!"

2. Breaking the news to family

Guy - Mum, dad, I have something to tell you... (sits down between parents)

Mum - What is it?

Guy - I have HIV (both parents move their seats away from their son)

Dad - This is terrible... Why have you brought shame to our family?!

Guy - I am sorry.

Dad - You must leave our house before you make us all sick.

Mum - Take your things and sleep over there. Keep your dishes separate!

Guy - No! You don't understand! HIV is not spread in those ways!

Dad - Go, NOW! (points out the door)

Guy - This is not fair. I cannot make you sick.

Mum - Please do this, for the sake of the family. (Guy slowly, sadly walks away)

DISCUSSION QUESTIONS

- * Why would it matter if someone in your family was HIV positive?
- * Would the HIV status of a family member change your opinion of that person?
- * Do any of you have any stories or experiences?

Discussion reflections: Unlike the role play, our group agreed that it was important that family and friends supported and cared for someone with HIV. The students understood that it was due to lack of education that many people shun or discriminate against HIV positive people. We saw this as an opportunity to encourage the students to share the knowledge that we had imparted on them in today's session with other students, family and friends as a way of helping others to understand HIV/AIDS and its implications. Students shared stories of how the community shunned the whole family once they discovered that the son had contracted HIV; no-one dared to shop at the family business anymore, which consequently went bankrupt. We also talked about the difficulty and risks involved in maintaining a physical relationship if your partner was HIV positive, also the psychological as well as medical support a HIV positive person would need in their situation.

SKIT TWO - CONDOM USE / WOMEN'S POWER

QUESTIONNAIRE

8. Would you buy a condom from a pharmacy? YES/ NO

9. Do you know how to use a condom? YES/NO

Boy - Tonight is the night. Let's have sex.

Girl - I feel ready, let's go.

(Walk away together)

(Later... sitting close together)

Girl - Do you have a condom?

Boy - What?!

Girl - A condom... I think we should use a condom.

Boy - Who do you think I am? Do you think I have AIDS?

Girl - No, but I think we should protect ourselves.

Boy - Don't be silly... Where would I even get a condom anyway?

Girl - At the pharmacy.

Boy - My mother works there. I could never...

Girl - Then we will not have sex tonight!! (firm)

Boy - You should trust me... Come on!

(girl moves in an indecisive manner)

DISCUSSION QUESTIONS

- * Is it uncomfortable to buy condoms from a stranger or from family/friends?
- * Does buying condoms infer something about someone?
- * Where can you buy condoms?
- * What kind of changes should be made to make condoms more accessible?
- * What kind of changes should be made to make condoms more pleasant?

Discussion reflections: There was some resistance to handling the condoms in our group. One girl claimed that she didn't have a boyfriend, so did not need to learn how to use a condom and even if she did, it would be her boyfriend's responsibility, not hers. Others expressed that it was their belief in 'no sex before marriage' so learning about condom use now was not relevant. We responded to this idea, by encouraging the students to learn to technique now that in the event of needing to use one in real-life, they would be prepared. We reflected on the skit, where the boyfriend was indifferent to using a condom. We noted that it was the girl who understood the importance of having safe sex and her role in initiating its use. I also thought it was important to stress the importance of choice – saying 'No' (as the girl did in the role play) to unsafe sex or sex, in general, if they were not comfortable with the situation.

Natalie and I shared experiences from our countries, explaining that condoms are

available at supermarkets, petrol stations, pharmacies and there are some vending machines in public toilets. Most students seemed in awe of the idea of condoms being so freely available. The contrast, in Vietnam, condoms are sold only in pharmacies, which stock a very small range and are kept out-of-sight behind the counter. For this reason, all students agreed that they would find it difficult and embarrassing to buy condoms at their local drug store. It was unanimous that discretion was preferred. The idea of sex education in schools, which Natalie and I had both experienced in high-school, was simply unheard of and students thought it most likely would not be adopted by schools there.



SKIT THREE - HIV TESTING

QUESTIONNAIRE

10. Would you be embarrassed to get an HIV test? YES/NO

11. Do you know where to get an HIV test? YES/NO

SKIT - HIV TESTING

(engaged couple walk along arm in arm)

Girl: Anh oi! I have something to tell you

Boy: What is it?

Girl: Before the wedding, I think we should get our blood tested.

Boy: Why?

Girl: Because there are diseases...such as...HIV.

Boy: But you look healthy. I'm healthy. Why would we have to worry about HIV?

Girl: I know I feel fine. But you've had many other girlfriends before me. And in university I....I.....(looks embarrassed)...I just think we should check just to be safe.

Boy: Don't worry, all my girlfriends were good and healthy. And I saw your old boyfriend last week, he looked fine!

Girl: But I read in the paper, you can look healthy but still have HIV. Please can we go get tested.

Boy: Nah (shakes head). This is silly. Let's go. We have to prepared for the wedding (pulls finace in the opposite direction of the HIV testing centre)

DISCUSSION QUESTIONS

* Would you feel comfortable talking to your doctor about HIV or other sexual health issues? Why / Why not?

* Would you have a preference between male or female doctors?

* Would you see the regular family doctor? Do you trust them to keep a secret?

* Have you heard any stories about HIV tests?

* Where can you get HIV tests? (Lead on to contact details, websites & further info)

Discussion reflection: One of the girls in my discussion group brought up the issue of unfaithful spouses; explaining that even if you are faithful to one partner, there's the possibility that he/she could be unfaithful, without you knowing. It was an idea that I hadn't considered so it took me by surprise, however I quickly saw it as an avenue to emphasise the idea of condom use as a form of self protection – protecting against unwanted pregnancy, and STIs (which your partner may or may not know they even carry). It is better to be safe than sorry.

GAMES: The rationale of this activity was to create a fun yet educative means of handling and using condoms appropriately. We really wanted students to walk away with these important practical skills as well as portray a more positive (as oppose to taboo) view of condom use.

● Hot Condom

Students stood forming a circle, passing around a blown-up condom as the music played. When the music stopped, whoever was left holding the condom was 'out' of the game. The game continues until there is one winner left. This game was to allow students to become familiar with seeing and handling a condom (with lubricant).



● Condom relays

After a comprehensive demonstration (with Vietnamese translation) of how to use a condom correctly, and having individually practiced using cucumbers (with the guidance of VFP volunteers), a small number of students volunteered to participate in a relay. Students had to firstly correctly remove a condom already on the cucumber, before applying a new condom onto the same cucumber. Volunteers gave students advice during the game to ensure that the condoms were correctly used.



● Pin the Condom on the Man

Students were blindfolded and had to attempt to stick a condom onto a poster to a man, in the appropriate area. This game re-emphasized the appropriate application of the male condom.

