NEW CHOICES.  
NEW TREATMENT. 
NEW TIMING. 
NEW HOPE.

A Guide for Faith Leaders and faith communities to bridge the gaps in HIV testing, treatment, care and support for men and children.
NEW CHOICES. NEW TREATMENT. NEW TIMING. NEW HOPE.

A Guide for Faith Leaders and faith communities to bridge the gaps in HIV testing, treatment, care and support for men and children.


The Guide shows several examples of new messages of hope to share in faith communities. Indeed, faith leaders have such an important and unique role to play in stopping the spread of HIV: by sharing messages about the value of testing, the importance of adhering to treatment; by building strong relationships with families and partners; and by impacting their communities with stories of hope.
Over the past years, faith communities and faith leaders from 10 sub-Saharan African countries have been involved in discussions on how to end the HIV epidemic and ensure the future health of our children, adolescents, men and women. These examples of messages are the result of both research and of the critical discussions during which local leaders have proposed community-based ideas and solutions.

We are confident that the information and the new messages of hope contained in this booklet will inspire you to guide, support and accompany your faith community to bridge the gaps in HIV testing, treatment, care and support for men and children.
HIV: THE BASICS

What is HIV?

HIV (Human Immunodeficiency Virus) is a virus that attacks the cells that help the body fight infections. This then, makes it easier for a person to get sick from infections and diseases.

What is AIDS?

AIDS stands for Acquired Immunodeficiency Syndrome. AIDS is the late stage of the HIV infection that occurs when the body’s ability to fight off infections is badly damaged because of the virus.

HIV progresses to AIDS when people living with HIV don’t take their medication to control the amount of HIV in their blood.
HIV: THE BASICS

HIV Transmission

Understanding how HIV is passed from one person to another provides us with the knowledge needed to help educate our communities and loved ones about HIV prevention. First, let’s focus on ways HIV can be passed from person to person, which include:

► Unprotected sex with someone who has HIV;
► Sharing needles, or other injection or skin-piercing equipment with someone who has HIV;
► From an HIV-positive mother to her child during pregnancy, delivery or breastfeeding;
► In case of transfusion with HIV blood.
HIV: THE BASICS

As important as it is to understand how HIV is transmitted, we also must understand how it is NOT transmitted to both help educate our communities and help reduce negative stigma about HIV.

We know HIV is **NOT TRANSMITTED** through:

- Tears, sweating, coughing or sneezing;
- Caring for someone with HIV;
- Touching or sharing objects such as toothbrushes;
- Shaking hand or hugging;
- Touching or sharing surfaces or objects such as toilets, towels, dishes or clothes.
ADDRESSING GAPS

Addressing Gaps to Control HIV

As we think beyond 2020, our goal is that 95% of all people living with HIV will know their HIV status; that 95% of people who know their status are treated with ART, the HIV medication; and, finally, that 95% of people taking HIV treatment will have an undetectable viral load. This means that they will be able to live healthy, productive, active lives and they won’t transmit HIV to others.

How can we reach our goals? Where are the gaps in controlling HIV?

To achieve epidemic control, unreached populations must be diagnosed, linked into care, and retained in care. This is why we want to highlight some key strategies that have proven very successful in reaching populations that have been missed in HIV testing and treatment programming. Without diagnosis of these populations, we cannot succeed in reaching HIV epidemic control.
TRUSTED FAITH LEADERS CAN TAKE INNOVATIONS AND SOLUTIONS TO THEIR COMMUNITIES, TO ADDRESS THE CORE GAPS IN HIV TESTING AND TREATMENT
The story of Simon being compelled to carry the cross behind Jesus appears in all but John’s Gospel. It is one of the Gospel stories when a specific person is named and remembered.

I have often wondered why this is the case. By all accounts, Simon was a stranger and yet this sudden involvement in Christ’s last journey was thrust upon him in a shocking and clearly embarrassing way.

He had little time to object or pose any definite resistance to the soldiers who compelled him into service... it was not something he could refuse! It became a sudden and painful reality ... he was literally press-ganged into the service of the Lord!

‘Why me? Why now?’ are two questions that assail us all when our plans are interrupted ... the reaction is no different to the denial and resistance we all face when challenged by life threatening circumstances. I’m sure the next moments in Simon’s mind were filled with a barrage of self-examination, as with serious effort he struggled to find and keep his balance under the weight of the beam.

He was yoked in behind a man who had reached his last strength; brought in to stay the tortured man’s
premature death on the journey. He was there to stop this condemned man, Jesus of Nazareth, from dying before the full barbarism of the cross could be fatally imposed. “My God …. this man is on his way to death and I’m forced to help him?”

Maybe it is then that Simon realised his true calling in life, to help serve his fellow men in his hour of need…. For this he would be remembered…not just a nameless passer-by but a witness to hope… for only in his submission and sharing of the unrevealed redeemer’s cross was he, like us all, saved!

At the time he surely did not understand the full meaning of this tough experience or with whom he shared such a burdensome close encounter. Neither the shame thrust upon, him nor its true significance, would be revealed until the whole world learned that the man who’s cross, he, Simon of Cyrene, shouldered, had defied death and risen again.

“I Simon, father of Rufus and Alexander…. a foreigner… helped bear a stranger’s cross and only later learned it was the Lord of life that I served! I am a witness! It changed my life!”

So also, may we as strangers become known to our Lord and redeemed by him through sharing in the burdens of strangers on their way of the cross! This is the paradox of life, suffering overcome by the Resurrection!

**HIV in all its ways brings the truth of life and true love to us all as the affected, infected and those called to care. No longer is the virus cause for a journey of despair but through testing and treatment and care we can live in renewed hope and experience the power of God’s love brought near through relationships redeemed along the way!**
There are Gaps in Treatment for Men

Globally, antiretroviral treatment (ART) coverage for men 15 years and older was 55% in 2018, compared with 68% among adult women (UNAIDS, 2018).
There are Gaps in Children and Adolescents

Globally, only about half of the children and adolescents living with HIV are receiving Treatment.

These figures illustrate that there are serious problems in reaching and engaging men, children and adolescents.
THERE ARE GAPS IN TREATMENT FOR:
TUBERCULOSIS

There are Gaps in Treatment for Tuberculosis

People living with HIV are still dying from tuberculosis (TB). Nowadays, TB is the leading cause of death in people living with HIV. This in spite the fact that TB is both preventable and totally curable.

TB CAN BE PREVENTED!
EVERYONE WITH TB SHOULD LIVE CURED!
NO ONE SHOULD DIE FROM TB!
BARRIERS THAT KEEP MEN FROM ACCESSING HIV SERVICES:

To close the gaps in HIV diagnosis and treatment for men, we must recognize and address barriers to care. Research shows there are many barriers that keep men from accessing HIV services. These can include:

- Fear of testing positive and of disclosure of status
- Fear that others will no longer view them as masculine and strong
- Stigma
- Lack of access
- Lack of trusted health care
- Lack of male-centered care
STRATEGIES TO ENGAGE MEN

The following strategies have been effective in addressing barriers that keep men from accessing HIV diagnosis and cares:

► Deliver messages of hope!
► Integrate HIV with other health care services
► Offer accompaniment and support
► Offer choices in testing

► Offer support groups for HIV-affected individuals
► Remove gender inequality, stigma and discrimination
► Engage faith leaders to encourage couple’s and family testing
REACHING CHILDREN WITH LIFESAVING TESTING & TREATMENT

Given the burden of undiagnosed HIV infections amongst young children and the poor historic access to care and treatment for this population, strategies to identify, test and link children to HIV care and services are critical to have in place. They include:

► Encouraging pregnant women to get antenatal care and to get tested for HIV;
► Encouraging HIV-positive pregnant women to take their ART;
► Encouraging breastfeeding women to take their ART;
Encouraging male partners to support and accompany their wife/partner to access antenatal care while pregnant and after delivery; to get tested for HIV, including as a couple and with other family members; and if HIV positive, to take and remain on HIV treatment during pregnancy, after birth and for the rest of their lives;

Offering HIV testing for infants exposed to HIV within the first 2 months of life;

Offering HIV testing for children of adults living with HIV or whose parents have passed away.
NEW MESSAGES ABOUT HIV TREATMENT OF CHILDREN

In the past, 33% of HIV positive children who did not receive treatment were likely to die before their first birthday; 50% likely to die before age 2; and 80% likely to die before age 5. Today, however, there are new messages of Hope for Treatment that change the future for all HIV positive children.

The good news for children living with HIV include:

► All children with HIV can take treatment;
► We have better and better medications for babies and children;
► Most children who start ART right away can look forward to growing and developing normally, going to school, and making friends.
Strategies to effectively reach and engage older children and adolescents are different from those used to engage younger children. Proven strategies to better address adolescents’ needs in HIV service provision include:

- Youth engagement in support groups;
- Address and reduce gender-based violence;
- Mobilize community for change (schools, churches, mosques, etc.)

- Education programs for caregivers;
- Support appropriate disclosure;
- Prevention efforts to reach youth before age 12.
We must ensure that people who test positive for HIV are also screened regularly for TB disease and then treated appropriately.

In fact, we know that we can end deaths from TB by ensuring that people living with HIV:

- Get tested for HIV and start ART at once;
- Receive TB preventive therapy;
- Get screened for TB regularly so they can be diagnosed and treated early.

YOU can help by referring people with these symptoms of TB disease to a clinic:

- Persistent cough;
- Unexplained weight loss; fevers; extreme sweating at night.
NEW CHOICES ABOUT HIV TESTING
NEW CHOICES
ABOUT HIV TESTING

What are some opportunities to address these gaps? What is the Good News about New Choices available in HIV testing?

Today, we have New Choices available for HIV testing. With these options, individuals have more choice, privacy and control over how and where they are tested.

An example of this is HIV self-testing.
Many men avoid HIV testing because:

- Fear of discrimination, and
- Concerns about confidentiality

HIV self-testing is safe, accurate, and easy to use!

Now, in many countries, there are tests called self-tests, that people can take in the privacy of their own homes.
NEW CHOICES FOR HIV DIAGNOSTIC TESTS

An HIV diagnostic test is the initial testing that individuals take if they want to know if they are HIV positive or negative.

There are different kinds of HIV tests including blood tests and oral fluid tests. Some tests are performed by healthcare workers. In many countries, there are HIV tests that individuals can do themselves in their home.
Facebook are working to increase identification through HIV self-testing.

Faith community leaders, and FBOs can help reach people who may feel more comfortable with using a HIV self-test for initial testing, with confirmatory testing taking place at the clinic. In addition they can support those testing with “buddies” who accompany them to the clinic.

Training local leaders and organizations on how to use HIV self-tests is essential to reaching those who are in need of knowing their status.
Another strategy for diagnosis is index testing.

Who is the Index Client?
An index client is anyone who tests positive for HIV. The person who tests positive is referred to as the index client.

What is Index Testing?
Index testing is a voluntary process whereby counsellors or health care workers ask people who test positive for HIV to list all of their sexual partners, injecting drug partners, and biologic children.

The goal is to test these contacts. If the person who tests positive for HIV is a child, a health care provider will list their biological parents and siblings as well.

Why is index testing important?
- Index testing is an important way to help identify those who were exposed to HIV and link them to care quickly if they test positive.
- This strategy has proven to be very effective in finding, testing and treating HIV positive individuals in communities. Ultimately, this strategy can help us identify those who need to access HIV services, bringing awareness of HIV status to those who are HIV positive.
TAKE CARE OF YOURSELF!

2 Kings 5: 1-27 Naaman

In general, men find it difficult to admit their need, to ask for help and to follow the advice of others. There is a sense of not being in control and that is humbling but it may be just what is needed for healing.

The story of Naaman in 2 Kings depicts the situation of the highly respected commander of the army of the king of Babylon who finds his power and position did not protect him from a dreaded disease. His wife’s young slave girl from Israel suggests he might find the healing he is looking for from the prophet in Samaria. With the endorsement and support of the King, Naaman sets out for Israel. Secure in his position of power, influence and wealth, and with preconceived ideas and expectations of what should happen for him, he first went to the wrong place - to the King of Israel instead of to the Prophet of God. When he finally does go to the right place, he questions what is required of him with arrogance. It almost costs him the miracle he needed. With the persuasion of those accompanying him, he reluctantly has the humility to let go and let God, and thus find the healing he had sought. God was able to work in Naaman’s life, freely restoring him to full health physically and, more importantly, spiritually.
Don’t dismiss the caring voice of someone you may consider beneath your pride or the simplicity of what might be asked of you, because your expectations are of something more complicated than it is these days.

Being tested for HIV and then following the instruction of consistent regular intake of the necessary medicines maybe all that is needed in order to restore good health to a person living with HIV, but this requires recognition and acceptance of the process and thereafter discipline to see it through.
TAKE CARE OF YOURSELF AND
TAKE CARE OF YOUR FAMILY!
NEW TREATMENT
EASIER, BETTER, SAFER
NEW TREATMENT

In the past, HIV treatment required many pills that had to be taken often throughout the day. Those medications had multiple side effects and individuals weren’t able to eat a number of foods with them. Also, old medications sometimes stopped working after a long-term use.

Now, new treatments are easier, better and safer than ever before. Individuals with HIV usually only take a single pill once daily. Side effects are uncommon, and this medication doesn’t interact with many foods. In addition, newer optimal medications continue working with ongoing use and allow for faster viral load reduction than with older medications.
MORE CONVENIENCE:

_HIV treatment on your terms_

People with HIV have many more New Treatment options today. Not only has the medicine changed from many pills daily to one pill daily, but also instead of visiting the clinic every month, clients can visit once every three to six months. This dramatically reduces the patient cost of transport, but also ensures their self-reliance to bolster their own health and well-being. This change facilitates male clinic visits in the local community where hours can be tailored to their work schedules and address their specific concerns.

Taken together, all these changes lead to faster viral load suppression.

 THEN

Frequent (monthly) visits to the clinic
Long wait times, which kept men away
Clinics seen as spaces only for women, not for men

 NOW

Treatment supplies given for 3 to 6 months often taken to communities for easy access
Tailored men-only clinics
Faster viral load suppression
TB PREVENTION AND TREATMENT FOR TB DISEASE

HIV diagnosis and treatment are keys to a person’s well-being and to a long, healthy life. The enormous toll tuberculosis takes on people living with HIV must also be recognized. TB is the leading cause of death among people living with HIV, yet it is preventable and treatable. TB prevention and treatment are and will remain a critical and core part of HIV and AIDS treatment and care.

TB preventive treatment is:

► Widely available for all persons living with HIV
► Available as a short regimen - just once a week for 12 weeks, with few side effects.

“New medicines for treating TB disease are now very effective, and build strength and health.”
NEW TIMING
EARLY INITIATION OF TREATMENT
NEW TIMING

Starting HIV treatment (ART) at once for All People Living With HIV

Research has shown that the earlier an HIV-positive individual begins treatment, the better their overall health and lifetime outcomes. We used to measure the severity of HIV and only gave treatment to those whose body immune systems had been nearly destroyed. Now, however, we have learned it is much better to give treatment immediately following an HIV positive diagnosis, even when the body’s immune system appears totally healthy.

Test and Start

Test and Start means that we start ART as soon as someone tests positive for HIV.

Early treatment allows people living with HIV to have a long, healthy, productive life and protects their partners and children from getting HIV.

People with HIV should also receive treatment to prevent TB disease.
REBUILD THE WALLS!
RECLAIM YOUR HEALTH!

A defining event took place in the history of Israel, around 586 BC, when they were defeated in battle and the cream of the citizens were taken as captives into Babylon (modern Iraq). About 100 years later Nehemiah, a Jewish leader in service to the King of Persia, learned that the remnant of Jews in Judah was in distress and that the walls of Jerusalem were broken down. He asked King Artaxerxes for permission to return and rebuild the walls. Not only did he agree but he sent him to Judah as governor of the province with a mission to rebuild and provided him with letters of authorisation and support for the necessary materials to undertake the work.

Returning to Jerusalem Nehemiah found the walls severely breached, leaving the remnants totally vulnerable to their enemies. He also saw that the people seemed lost and needed to be reconstituted as a nation. The rest of the book of Nehemiah describes this remarkable feat, unifying the people in a common purpose, and despite threats of attack, the people accomplish the task of rebuilding in a record time of 52 days! This was followed by a period of listening to the words of the Torah and its explanations, committing to follow the instructions and ultimately reclaiming their identity as a people of God.
Rebuilding the broken walls led to a redefining of their identity and gave them purpose as a people of God. How does that relate to us today?

HIV breaches our walls – our walls of defence against infection, progressively making us more and more vulnerable to our enemies: TB and other opportunistic infections. When the physical is knocked down, so is the identity and with the loss of identity and a sense of control, we may feel lost. That is when we need to find our ‘Nehemiahs’ – those who can help us identify the enemy (through an HIV test) and who support us – together with the community of health care providers, family and friends and others who have walked the same pathway, to ‘repair the walls,’ to keep out further attacks and help us once more reclaim our identity and future. Alone we are vulnerable but together, utilising all that is now available and committing to the recommended adherence, HIV can be suppressed to undetectable and thus untransmittible levels: it ceases to be the threat it once was and our future, and that of our loved ones, is full of hope.

Scripture is full of wonderful stories, threads of hope woven through history into our redemption and ultimate reconciliation with God and our neighbour.

As old as some of these stories maybe, they still have a message that is as alive and relevant today as it was then.

‘Rebuild the Walls’ – reclaim your health – redefine your identity – take control again!

You are NOT alone!
MESSAGES OF HOPE
NEW MESSAGES OF HOPE ABOUT HIV

New Hope: When people living with HIV start treatment as soon as they are diagnosed and then takes their medication regularly as prescribed, they live long, healthy and productive lives. This brings them NEW HOPE for their own health.

And they also can have NEW HOPE for helping protect their families, their communities, and those they care about, because those who take their medication regularly as prescribed cannot pass on HIV to their loved ones.

Faith and community leaders can help spread the good news by adapting messages like this one:

“Stay on treatment and you won’t spread HIV to people you care about!”
A LONG, HEALTHY LIFE — WITH HIV MEDICATION & UNDETECTABLE VIRUS!

The tremendous progress made in testing and treatment regimens has given us New Hope!

- A long, healthy life is possible with HIV medication and an undetectable viral load
- Treatment for HIV will prevent progression to AIDS
- With regular treatment for HIV, we can stop the spread of HIV and END AIDS.
This is a message of hope for those living with HIV, and in country after country, this message is being adapted to the local contexts. It is the message that when taking HIV medication regularly as prescribed, a person living with HIV will not transmit the virus to his or her partner or partners. U=U means that people living with HIV no longer need to feel like a threat to those they love; it empowers them and gives them the confidence and tools needed to protect themselves and their loved ones.
VIRAL LOAD TEST & UNDETECTABLE VIRAL LOAD

Viral load tests are only used by people living with HIV.

- A viral load test measures how well a person with HIV is responding to treatment by looking at how much HIV is present in their blood.

- This viral load test is a different test than the one that shows whether someone is infected with HIV or not.

- If a person takes their HIV medicine correctly every day as prescribed, HIV treatment makes the amount of HIV in their blood go down until a viral load test shows that there is not enough HIV in the blood to be measured.

- When the viral load test shows no measurable HIV in the blood, this is called “undetectable viral load” or “viral suppression”.

“Being undetectable does not mean a person’s HIV is cured!”
UNDETECTABLE VIRAL LOAD = UNTRANSMITTABLE HIV

Having an undetectable viral load ensures that a person living with HIV will not transmit HIV to their partners nor to their children.

Being undetectable does not mean that a person’s HIV is cured. Instead, it means that their medicine is working; that it is stopping the virus from growing; and that the amount of HIV in the person’s blood is too low for a test to detect it.
When people take their medicine daily, as prescribed, the medication can quickly reduce HIV viral load to undetectable levels on a viral load test. When the person living with HIV who takes his/her medicine daily and maintains an undetectable viral load, he or she will not pass HIV to their partner/partners nor to their children. We call this “untransmittable.”

Let’s continue to share this message with our communities!

INDIVIDUALS WITH UNDETECTABLE VIRAL LOADS WILL NOT TRANSMIT HIV TO THEIR PARTNERS

This message gives people living with HIV the confidence and hope that they can have normal, healthy relationships in which they can protect themselves and their partners.
There are many other benefits of taking HIV medication to keep viral load undetectable. The Benefits of Taking ART include:

► It helps people with HIV live a normal, healthy life, and to stay strong and productive;
► It prevents serious illnesses;
► It helps keep the brain healthy and the memory strong;
► It decreases the number of clinic visits for a person living with HIV;
► Undetectable HIV cannot be passed to partners through sex;
► Mothers who reach an undetectable level before pregnancy have a reduced risk of transmitting HIV to infant during birth or through breastfeeding.
SUPPORT YOUTH CHAMPIONS IN OUR CHURCH!

1 Timothy 4:12; Proverbs 20:11; Matthew 11:25

As people of faith, we’re challenged to listen to and engage with young people. It is our responsibility to support them to take action and become messengers of hope. Young people can be exemplars, peer educators and champions for issues faced by their peers. There is strong evidence that adolescents living with HIV respond well to youth peer educators and champions. Young people are also more comfortable talking or asking questions to a peer than to an adult. Peer-support groups are safe spaces where experience, knowledge, consolation, empathy and sound advice are offered to all. It is our responsibility to create such spaces in our churches and to encourage our youths to lead them. Let’s make our church a welcoming, supportive and empowering space for youths living with HIV!
LIFE SAVING TREATMENT

A man was drowning. A fisherman in a small boat came by and said, “I will help you!” The man said, “No, thank you. I prayed. My faith will save me.” Another boat came to him and the man onboard said, “Get in! I can help you.” The drowning man said, “No, thank you. My faith will save me.” The man drowned. After he died, he asked, “Why didn’t you save me?” A voice said, “I heard your prayers and sent you two boats. You didn’t take my help.”

HIV Treatment, Adherence & and Faith Healing

Just as the boats in the story were the answers to the man’s prayers, for a person living with HIV, HIV medication IS the answer to the prayer for a healthy life. If people don’t take their medication they will become sicker and die. However, people who do take their medicine will be healthy, live a long life and won’t give HIV to their partners.
What you can do

Faith leaders can build health for their communities by spreading these essential facts about treatment for those living with HIV:

► If people DO take their medicine daily as prescribed, they will be healthy, live a long life, and won’t give HIV to their partners.

► If people DON’T take their medication, they will become sicker and die.

Faith Leaders have an important role in stopping the spread of HIV:

► Encourage people to get tested
► Encourage people living with HIV to take their medication
► Advocate for care and prevention for those living with HIV
► Pray for physical and emotional strength of those affected by HIV
► Call on communities and families to support people living with HIV
FAITH LEADERS

Faith leaders have such an important and unique role to play in stopping the spread of HIV: by sharing messages about adhering to treatment; by building strong relationships with partners and families; and by impacting their communities with stories of hope.

**Messages Faith Leaders Can Use to Share the U=U News**

Faith leaders can help decrease stigma about HIV, empower those living with HIV and bring communities together through adaptation of the U=U messages.

**These are examples of critical and key messages:**

- Remember! Treatment stops the virus from passing to anyone else
- Your life matters! Live productively, strong & long with HIV treatment for life
- The church and community need men and women like you, so live well with ART: Start and Stay on Treatment!
- Diagnosis improves couples’ communication so they can encourage each other and talk about health issues
PREVENTION

What should we do if an individual at risk of HIV infection tests HIV negative? What prevention strategies can help him/her to remain HIV negative?

"As leaders in your communities and places of worship, YOU can help spread the GOOD NEWS about epidemic control."
Voluntary Medical Male Circumcision

Voluntary Medical Male Circumcision or VMMC is a prevention tool that can be accessed by men who may be exposed to HIV or are at risk of exposure. VMMC is the surgical removal of the tissue covering the head of the penis, which lowers risk of obtaining or transmitting HIV from sex.

Voluntary Medical Male Circumcision (VMMC):

- Lowers the risk of men acquiring HIV through sex
- Lowers a man’s chances of getting or transmitting sexually transmitted infections or getting penile cancer
- Lowers a female partner’s chances of getting cervical cancer
Pre-Exposure Prophylaxis (PrEP)

Another HIV prevention strategy available to people who may be exposed to HIV or are at risk of exposure is called Pre-exposure Prophylaxis, or PrEP. PrEP consists in the use of anti-HIV medication that keeps HIV-negative people from getting HIV. PrEP has been found to be highly effective. HIV negative people who take PrEP every day can lower their risk of acquiring HIV by more than 99%.

PrEP is only to be used by people who are HIV negative and it is recommended for people at elevated risk of getting HIV, such as discordant couples where one partner is HIV positive and one is HIV negative. PrEP should be used in addition to other prevention services.
MESSAGES OF HOPE
TOPIC 1: HOW MEN FEEL

1. **TAKE CARE OF YOURSELF AND TAKE CARE OF YOUR FAMILY!** — An HIV test may help you and your family stay strong and live well! With self-testing available you chose where and when! If you or someone in your family has risk or is living with HIV, make sure you and your partners and children get tested.

2. **ARV’s are GOOD FOR YOU!** — Your life matters! Live productive, strong & long -- with HIV treatment for life!

3. **ARV’s are GOOD FOR YOUR FAMILY!** — Treatment stops the virus from passing!

4. **ARV’s are GOOD FOR YOUR FAITH!** — The COMMUNITY needs men like you, so live well with ARVs — start treatment at once and stay on treatment every day!

5. **TESTING can IMPROVE COUPLES’ COMMUNICATION!** — Give each other courage to test together, or apart and disclose; when two become one, they are open about health.
TOPIC 2: ENGAGING MEN

1. REAL MEN CELEBRATE HEALTH in body and soul!
2. REAL MEN SHOW REAL STRENGTH by asking for help when we need it!
3. PROTECT YOURSELF AND PROTECT YOUR FAMILY! by taking your ARVs religiously, as prescribed! Prayer together with ARV adherence protects you and those you love!
4. STRONG MEN STAND together in health for body and soul, as we pursue our dreams for ourselves, our families, our congregation, our nation!
5. WE RAISE A VOICE OF HOPE! — with open arms to those living with HIV!
6. BE A STRONG MAN! TAKE CARE OF YOUR FAMILY!
7. BE SMART! REALIZE YOUR DREAMS by taking ARVs every day!
8. WE ARE OUR ‘BROTHERS KEEPERS’— HIV affects us all, so we care for one another!
TOPIC 3: MEN’S PREFERENCES FOR HIV CARE

1. ‘MEN-FRIENDLY’ MEETINGS IN SAFE SPACES open new doors of hope. Simple health education and HIV self-tests can be integrated into bible studies, peer-support groups, services, sports’ events, conferences.

2. LOVE ONE ANOTHER! When a man has a partner, who may be at risk of, or living with HIV, it is important for both to test.

3. WITH LIFE AT IT’S BEST — MEN CHOOSE WHERE TO TEST! — at churches and mosques, it’s easy, private, and fast!

4. RESPONSIBLE MEN PLAN AND GET TESTED FOR HIV because it is the first step to a healthy life and a healthy family!
TOPIC 4: HOW CARE PROVIDERS FEEL

1. OUR TRAINED CARERS GIVE HOPE THROUGH ACCOMPANIMENT AND SUPPORT GROUPS for anyone living with HIV! Prayer together with ARV adherence protects everyone we love!

2. IN THE FACE OF ANY CHALLENGE, WE STAND in compassion, hope, and love!
TOPIC 5: HOW MOTHERS CAN HELP

1. TAKE CARE OF YOUR FAMILY!
   - An HIV test helps you and your family stay strong and live well!
   - If you are living with HIV, make sure that your partners and children get tested.

2. EVERYONE LIVING WITH HIV DESERVES TREATMENT RIGHT NOW!
   - Treatment is free, and it works – for sons and daughters, for fathers and mothers, for brothers and sisters – for the whole family!

3. HIV TREATMENT PROTECTS YOU AND THOSE YOU LOVE!
   - Everyone in your family can live strong with HIV treatment for life! Treatment stops the virus from passing!
   - All children with HIV can take treatment, and most children who start ART right away can look forward to growing and developing normally, going to school, and making friends.
TOPIC 6: HOW CHILDREN’S & YOUTH LEADERS CAN HELP

1. CHILDREN CAN GET HIV, TOO
   - Sometimes as babies, from their mothers — so if it’s possible the parents of someone you know may have HIV, it’s good for their children to get tested! Free ARVs will keep them healthy for life!
   - All children with HIV can take treatment, and most children who start ART right away can look forward to growing and developing normally, going to school, and making friends.

2. EVERYONE LIVING WITH HIV DESERVES TREATMENT RIGHT NOW!
   - Treatment is free, and it works for everyone – for children, for sons and daughters, for fathers and mothers, for brothers and sisters – for the whole family!
TOPIC 6: HOW CHILDREN’S & YOUTH LEADERS CAN HELP

3. HIV TREATMENT PROTECTS YOU AND THOSE YOU LOVE!
   ► Everyone in your family can live strong with HIV treatment for life!
   ► Treatment stops the virus from passing!

4. WE YOUTH LEADERS STAND STRONG FOR HEALTH!
NEW CHOICES. NEW TREATMENT. NEW TIMING. NEW HOPE.

www.faithandcommunityinitiative.org

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