Counseling about sexual behavior

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Olga’s story

Olga works as a maid in a hotel in Tashkent, Uzbekistan. With her country’s new independence, more foreigners have been traveling to Tashkent, and there has been news about several cases of AIDS. Because she cleans hotel rooms where foreigners stay, Olga has become worried. Most mornings she passes by your information table outside of the post office on her way to work. Today she stops and asks you, “Can I get AIDS from cleaning the rooms of German and American visitors? Should my husband and I use condoms to avoid giving each other AIDS?”
HIV and discrimination

People who do not understand how HIV is spread may discriminate against people with HIV—that is, they may treat them unfairly because they are afraid of getting the virus. Discrimination occurs not only against people with HIV but also against groups of people that are more likely to have HIV, such as sex workers, or are mistakenly thought to have HIV, such as foreigners. Teaching people about the real ways that HIV is spread protects them from the virus; teaching people about the ways that HIV is not spread protects everyone from unnecessary discrimination.

This chapter discusses how HIV can be spread during sex and how to have safer sex. The next chapter will discuss other ways that HIV can be transmitted.

Helping people change behavior

People can lower their chance of getting HIV by changing their behavior. The most important step in helping people change the way they act is to spark a desire to change. No one changes overnight. Small goals are often easier to reach than large ones. For example, never having sex is the surest way to avoid getting HIV through sex, but it is not realistic for most people. Stopping the use of drugs that are injected, like heroin, is another way to avoid HIV, but not everyone who uses drugs is able to stop. Taking small steps toward safer behavior will protect people more than no change at all. You may end up teaching people to use condoms until they and their partners can get tested, or to clean needles with bleach until they quit using drugs.

Sometimes a person does not have the choice to practice safer sex. Condoms may be too expensive to buy. A woman may not be able to ask her husband not to have other sexual partners. Take into account each person’s life situation when you suggest ways to avoid HIV. Talking to people about how HIV is spread and how they can be safer will help them make their own decisions about their next step toward a safer lifestyle.

Changing behavior is hard work. There may be times when a person repeats unsafe practices. Do not give up; continue to encourage people to try to change unsafe behavior.
Casual contact and HIV

HIV is not spread by casual contact. The HIV virus cannot live in air, water, or food; it is weak and only lives in body fluids. It only spreads if the body fluid of a person with HIV gets inside another person. This is why shaking hands with people with HIV does not spread the virus. If this were not true, many more people would have HIV. Nurses, doctors, teachers, classmates, coworkers, friends, and family all touch people with HIV and do not get infected. People who live or work with people with HIV do not get the virus unless they have sex or share needles with them. The virus is not spread by doorknobs, typewriters, telephones, money, or anything else that has been touched by someone with HIV. HIV is not spread by hugging, touching, holding or shaking hands, dancing, using the toilet after someone with HIV, or eating food prepared by a person with HIV. People have shared dishes, towels, and bedsheets and still not become infected with HIV. No one has ever gotten HIV from sharing cigarettes, or being cried, sneezed, or spit on. Mosquitoes do not spread HIV. Other viruses like measles or chicken pox are spread easily through the air. We are lucky that HIV is so difficult to spread.
Sex and HIV

HIV is spread through sex. It can be spread from men to women and from women to men. It can also be spread among men and among women. A person can get HIV from a sexual partner who appears healthy but has HIV. Anyone can get HIV, not only sex workers and drug users—a judge, bartender, farmworker, or doctor can get HIV if she has sex with someone with the virus. It can infect people who are tall, fat, small, old, young, black, white, yellow, brown, male, female, mothers, fathers, brothers, and sisters. Anyone. Who a person is does not matter to the virus. What matters is what a person does. HIV does not discriminate by who you are, but by what you do.

A sure way to avoid getting HIV from sex is to never have sex. While having no sex is safe, most adults want to have sex. Knowing how HIV is spread, some people will choose never to have sex; others will choose to have sex only with one partner; and others will have several partners. Teaching people the risks involved will allow them to make choices that are based on fact.
Talking about sex

Many people have sex but do not talk about it. Because of HIV and AIDS, this must change. Sexual partners have to talk about what they are doing. Talking about HIV before having sex is much better than talking about it afterward (or during!). Often people have thought about HIV but feel uncomfortable talking about it with their sexual partners. Those who finally talk about HIV usually feel relieved. This is especially true in places where anxiety about infection is common.

You can teach people how to talk about sex with their partners. One way is to have people role-play a discussion. Role playing works well because it takes an embarrassing and intimate situation and brings it into the open. It prepares people for the real thing (see Chapter 11).

One of the most important skills to teach people is how to say no. It can be difficult for people to say that they do not want to have sex. They may have trouble saying that they only want to kiss, or that they want to touch without having intercourse. It is common to feel awkward saying these things.
But everyone has the right to do only what she wants to do. Role playing can be useful for teaching people different ways to say no.

People often ask, “How can I have sex without getting HIV?” People with HIV do not always spread the virus during sex. Some people with HIV have had sex without condoms many times without giving their partners the virus. Some people with HIV have had sex only once and have given the virus to their partners. No one is sure exactly why this is true. Part of the reason is that the amount of virus in a person goes up and down over time. Another part of the reason is that some types of sexual acts have a higher chance of spreading HIV than others do. Understanding which types of sex have a higher chance

<table>
<thead>
<tr>
<th>Refusal skills: How to say no</th>
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<tbody>
<tr>
<td>Here are some ways people in one country have said “no” when they did not want to have sex. You can use these or think of other ways that would work where you live.</td>
</tr>
<tr>
<td>Get the other person’s attention:</td>
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<tr>
<td>Use his first name</td>
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<tr>
<td>Look into his eyes</td>
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<tr>
<td>Say “Listen to me”</td>
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<tr>
<td>Say no:</td>
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<tr>
<td>Use the words “I said no”</td>
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<tr>
<td>Use a firm voice</td>
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<tr>
<td>Hold your body in a way that says no</td>
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<tr>
<td>If pressured to have sex anyway:</td>
</tr>
<tr>
<td>Say no again</td>
</tr>
<tr>
<td>Suggest doing something else</td>
</tr>
<tr>
<td>Leave</td>
</tr>
<tr>
<td>Other ways to say no:</td>
</tr>
<tr>
<td>Use humor</td>
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<tr>
<td>Ask him why he cares so much about having sex; this puts the pressure on him</td>
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<tr>
<td>Keep repeating what you want</td>
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<tr>
<td>Tell your partner you need to think about it more</td>
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<tr>
<td>Questions to ask yourself:</td>
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<tr>
<td>Am I being pressured?</td>
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<tr>
<td>Do I need more information before I make a decision?</td>
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<tr>
<td>Is there a way I could avoid this situation in the future?</td>
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</table>
of spreading HIV helps people understand the risk they are taking. People can then talk with their partners about what kind of sex they want to have.

People use different words to talk about sex in different communities. It is helpful to learn and become comfortable using these words. Since this book cannot use all the words that people use locally, we will define and use only a few words. Some people use the words “vaginal sex” to discuss a woman having her vagina touched by her partner’s mouth, fingers, penis, or other objects. We do not. We use the words “vaginal sex” only to talk about when a man’s penis enters a woman’s vagina. Similarly, we use the words “anal sex” only to describe when a man’s penis enters a woman’s or man’s anus.

Sexual acts with no risk of spreading HIV

Some sexual acts have *never* spread HIV and are completely safe. People who have completely safe sex do not exchange body fluids such as semen, blood, vaginal fluid, or saliva. Safe sex is when only the outsides of people’s bodies touch. This is safe even with people who are known to have HIV.
Safe sex includes using hands to touch a person’s vagina, penis, anus, breasts, or nipples. It also includes “dry” kissing, hugging, or rubbing bodies together. (Dry kissing is kissing with closed mouths.) People can do all of these things as much as they like without increasing their chance of spreading or catching HIV. Masturbation is also a form of safe sex.

<table>
<thead>
<tr>
<th>What kinds of sex risk spreading HIV?</th>
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<tbody>
<tr>
<td><strong>No risk</strong></td>
</tr>
<tr>
<td>Dry kissing</td>
</tr>
<tr>
<td>Masturbation</td>
</tr>
<tr>
<td>Touching, hugging, massage</td>
</tr>
<tr>
<td>Fantasizing</td>
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<tr>
<td>Rubbing bodies together</td>
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<tr>
<td>Kissing someone’s body</td>
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<tr>
<td><strong>Low risk</strong></td>
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<tr>
<td>Wet kissing</td>
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<tr>
<td>Oral sex on a man or a woman</td>
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<tr>
<td>Vaginal sex with a condom</td>
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<tr>
<td>Anal sex with a condom</td>
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<tr>
<td><strong>High risk</strong></td>
</tr>
<tr>
<td>Unprotected vaginal sex</td>
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Sexual acts with low risk of spreading HIV

Many people ask whether kissing can spread HIV. Kissing has never been shown to spread HIV. However, people with HIV can have the virus in their saliva, so there may be a small chance of spreading HIV through kissing with open mouths and touching tongues (“wet” kissing).

Oral sex is touching someone’s vagina, penis, or anus with one’s mouth or tongue. Oral sex can spread the virus, but HIV is spread much less often during oral sex than during anal and vaginal sex. The less semen or vaginal fluid a person’s mouth touches, the less likely he will get HIV. This means using a condom on the penis or a covering (plastic wrap or latex) on the vagina will lower the chance of HIV being spread. Oral sex on a woman is probably less safe during her period or menses.

Vaginal, anal, and oral sex with a condom are not completely safe, but they are much safer than not using a condom. There is some risk even when condoms are used, because they can break or leak. To lower this risk, a man can use a condom but ejaculate outside his partner’s vagina, anus, or mouth.

Sexual acts with high risk of spreading HIV

Vaginal sex frequently spreads HIV. Semen, vaginal fluid, and blood can be exchanged during vaginal or anal sex. A woman has a higher chance of getting HIV during vaginal sex than a man does. In other words, a woman having
vaginal sex with a man who has HIV is more at risk than a man who has vagi-
 nal sex with a woman who has HIV. The risk is probably twice as great. It may
 be because more semen gets inside a woman’s vagina than vaginal fluid enters
 a man’s penis. There may also be more virus in semen than in vaginal fluid.

Anal sex spreads HIV even more easily than vaginal sex. This may be
because the skin inside of a person’s anus is more fragile than the skin inside
of a woman’s vagina. It may tear and bleed. The same risk for spreading HIV
exists for anal sex between two men as for anal sex between a man and a
woman. As with vaginal sex, the “receptive” partner in anal sex has double the
“insertive” partner’s risk of getting HIV. Who is having anal sex does not mat-
ter. It is anal sex that puts people at risk.

How to avoid spreading HIV through sex

There are five general ways to make sex safer. These are:

1. Choose carefully and limit the number of sexual partners.
2. Get tested and treated for sexually transmitted diseases, and ask partners to
get tested and treated too.
3. Have safer types of sex.
4. Use condoms or other barriers during sex.
5. Have sex less frequently.

Choose carefully and limit the number of sexual partners

A person who lives in an area where
many people have HIV has a higher
chance of having HIV himself. There
is also a high chance that the next per-
son he has sex with will have the
virus. The chances that his partner
will have HIV depend on whether she
has done something that puts her at
risk. Some issues to think about are
whether she has had sex in the past,
with whom she had sex (how many
partners she has had, and what their
histories were), whether she used
condoms, whether she has used drugs
and shared needles, and whether she

Talking to your partner could save your life
and your partner’s!
has had a blood transfusion. Since it is impossible to tell if people are infected by looking at them, partners need to talk about these issues before having sex. Knowing people’s life stories and their risk factors for HIV can help you estimate their chances of having HIV. Talking with your partner could save your life—and hers!

People who have sex with several partners can lower their risk of getting HIV by having sex with fewer partners and having sex with people who are less likely to have HIV. Sex workers who do not always use condoms have a high risk of having HIV because they have so many partners. Someone who has had sex with a sex worker without using a condom is at risk of having HIV. There are many different names for sex workers. It does not matter what a sex worker is called, or whether the person paid for sex or was the sex worker’s boyfriend, girlfriend, or spouse. The risk of HIV infection is the same. People should be encouraged not to visit sex workers or, if they do, to use condoms or take other precautions. They should ask their sex partners whether they have ever had sex with a sex worker.

Because sharing needles can spread HIV, partners should be asked whether they have ever injected drugs like heroin or speed. Asking about a partner’s drug use, now and in the past, will help a person know if there is a high or low chance that the partner has HIV.

If two people choose to have sex only with each other, they are choosing to be monogamous. If neither partner already has HIV, being monogamous helps keep them both safe from HIV. They can stay safe by not having unsafe sex or sharing needles outside the relationship and not receiving transfusions of blood unless it has been tested for HIV. If they take these precautions, they can be sure of never getting HIV. They are an “HIV-sheltered” couple.

If neither partner has ever had sex, shared needles, or had a blood transfusion, then there is no chance that either person has HIV. However, if just one of these things is not true for either partner, there is a chance that he could have HIV, and he should be tested. Since many people have had sex by the time they choose to build a monogamous relationship, in order to be sure that a negative HIV test really means that there is no virus, a month must pass after the last chance of getting HIV (see Chapter 7, “HIV testing”). Until this has happened and they can be sure the test is
accurate, even partners in a monogamous relationship should use condoms and take other precautions. To become an HIV-sheltered couple, most people will need to be tested. After the second test, two people without HIV who only have sex with each other could have sex without condoms forever and be sure of never getting HIV from sex.

Sometimes people who think of themselves as monogamous have sex with people outside their “monogamous” relationship. When this happens, even if both partners tested negative for HIV in the past, they are no longer an HIV-sheltered couple. This is why it is very important for people to tell their partners if they have sex outside the relationship. People in a polygamous relationship (having more than one sexual partner) can also be sheltered from HIV as long as all of the partners do not have HIV and do not have unsafe sex outside the relationship or engage in other risky behavior.

Encourage people to talk with their partners about which sexual practices have no risk, low risk, or a high risk of spreading HIV. People can practice safer acts like kissing, rubbing, and oral sex rather than vaginal or anal sex. This is especially important when one of the partners has HIV or is at a high risk of having HIV.

### When one person in a faithful couple is infected with HIV

Sometimes one person in a committed couple has HIV, and the partner does not. This is surprisingly common. Counseling people in a couple like this (sometimes called a discordant couple) can be difficult. One or both people in the couple may not believe the results of the tests—especially if they have been together and faithful for some time. Or the person who does not have HIV may blame the other for bringing HIV into the relationship. People may be afraid to be tested because this situation is so uncomfortable for most couples. Support from a counselor, friends, and family can help a discordant couple deal with the challenge of having HIV.

Discordant couples often question how it is possible for one of them to have HIV and the other not. Many things may be part of the answer—how much virus the HIV-infected person has, what kind of sex the couple has—but the main answer is chance. Chance means it is possible to get HIV the first time you have sex with an infected person and it is possible to have sex many times with that person and not get infected.

In a discordant couple the strategy of “being faithful” is not much help for preventing the spread of HIV. But it can be challenging to encourage people in a faithful, monogamous relationship (or in committed polygamous relationships) to use condoms or to practice abstinence or safer sex. Sometimes a couple may also believe marriage means each person is meant to share the fate of the other—even HIV—and there is no point trying to avoid it. Discordant couples can form support groups to discuss these issues. People in a support group can sometimes convince others that having sex in ways that protect the uninfected partner, like using condoms, is possible and worthwhile.
Get tested and treated for sexually transmitted diseases

HIV is spread through sex. People get other sexually transmitted diseases (STDs) like syphilis, gonorrhea, herpes, chlamydia, and chancroid the same way. This means people at risk for HIV are also at risk for these diseases. If someone has an STD, it greatly increases her risk of getting or spreading HIV. This is because these diseases cause sores and inflammation. The good news is that syphilis, gonorrhea, chlamydia, and chancroid can all be treated. To stop the spread of these diseases and to greatly lower the chance of getting HIV or giving it to someone else, people should be tested for STDs and treated.

Have safer types of sex

Some types of sex have no chance of spreading HIV; others have a high chance. Understanding the difference can help people choose safer types of sex. People can be encouraged to have oral sex instead of vaginal sex, or to touch each other with their hands instead of having oral sex. Making these choices will lower a person’s risk of getting HIV.

STD treatment helps stop HIV from spreading

A group of health workers and researchers in Mwanza, Tanzania studied twelve villages near Lake Victoria to find out whether treating people with STDs would help stop the spread of HIV. In six villages, health workers at local clinics received special training and drugs for the treatment of STDs. In the other six villages, normal STD programs were continued. At the end of the project, the villages with the supported STD treatment programs had 40% fewer new cases of HIV infection!
Use condoms or other barriers during sex

A condom is a soft rubber shield that is placed over a man’s penis. It acts like a bag that keeps semen from entering a sexual partner’s body. It can be used during vaginal sex, anal sex, or oral sex. Condoms do two things at the same time—they prevent pregnancy and they prevent the spread of HIV and other STDs such as gonorrhea, syphilis, chancroid, and chlamydia.

Using condoms is important but does not guarantee absolute safety. If a condom breaks or slides off the penis, it may not prevent pregnancy, HIV, or another STD. Learning to use a condom correctly helps avoid this problem.

A condom that has been in a pocket for months may not work well because age and heat will make it break more easily. Any condom package should be opened carefully to avoid tearing the condom. Many condoms come with lubricants already inside; these can help sex with a condom feel better and they can help keep the condom from breaking. Oil-based lubricants like petroleum jelly or vegetable oil should not be used with condoms because they weaken and break them.

Learning to use a condom takes practice, but once a person knows how, putting on a condom is easy. If a man has never used a condom before, he should practice putting one on alone. Rolling a condom onto your fingers, a piece of wood, or a banana is a good way to show a group of people how to use a condom. But, make sure they understand that the condom goes on the penis and not on the fingers! Helping a sexual partner put on the condom can make condom use part of sex. Some people are so skilled at putting on condoms that

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**The “female” condom**

Recently, a new type of condom was made: the “female” condom. A woman puts the female condom inside her vagina before she has sex. The advantage to a female condom is that a woman can use it without having to ask a man to put a condom on his penis. The female condom prevents the spread of HIV and other STDs, and pregnancy, just as well as the usual male condom. The problem with it is that it is expensive and not available in many places.
Counseling about sexual behavior

Selling condoms in Kenya

In 1997, the Kenyan Department of Public Health set up condom-selling machines in the Isiolo district to help stop the spread of HIV. The condom machines were placed in public places such as bars, hotels, and lodging houses. The hope is that making condoms easier to buy will mean more people will use them.

Their partners never notice. Some people are able to use just their mouths to put a condom on another person.

Condoms should be put on when a man’s penis is hard. A condom comes rolled up in a ring and should be unrolled directly onto the penis—do not unroll it first and then try to slide it on. Always press air out of the tip and leave some space there to catch the sperm. This will help prevent the condom
from breaking. If the condom does not fit down to the base of the penis, the man should be careful not to put the penis into his partner’s body beyond the base of the condom, or it may come off inside his partner. A condom should also be taken off correctly. After a man ejaculates, he should hold on to the base of the condom before gently pulling out from his partner. This avoids spilling sperm or losing the condom inside his partner. Condoms should never be used more than once.

Condoms are usually sold in pharmacies. No doctor’s prescription is needed to buy them. Often condoms can be found in other places like clinics, restaurants, bars, and hotels. Sometimes they can be bought from vending machines. Help people find the cheapest place to buy condoms. Many organizations now try to sell condoms at a low price or give them away for free in countries where they are not made; if there are health or HIV-related organizations in your area, ask if they can supply condoms.

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<thead>
<tr>
<th>Microbicides and spermicides</th>
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<tr>
<td>Chemicals that kill sperm are called spermicides. Sometimes condoms are coated with spermicides to increase their protection against pregnancy. Scientists are trying to develop a microbicide — a chemical that will protect against the HIV microbe — but as of 2005, they have not been successful. Several years ago, researchers thought that a microbicide called nonoxynol-9 might provide that protection, but in fact nonoxynol-9 can irritate the soft skin inside the vagina or anus so much that it should not be used.</td>
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When people ask you about condoms, bring up questions like “Who is responsible for making sure a condom is used during sex? How can you tell your partner that you want to use a condom during sex? What if your partner refuses to use a condom? Is sex without a condom so much better it is worth dying for?” Remember to talk about condoms with men and women.

Condoms are the most common barrier used to prevent the spread of HIV. However, people also use plastic wrap or latex sheets as a barrier during oral sex. Even though oral sex already has a low risk of spreading HIV, the risk is not zero.

<table>
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<th>Make condoms work better</th>
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<tbody>
<tr>
<td>Put them on and take them off properly</td>
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<tr>
<td>Do not store them in the sun, a pants pocket, or a wallet</td>
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<tr>
<td>Do not use condoms that have passed their expiration date</td>
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<tr>
<td>Use latex condoms; they prevent the spread of HIV better than ones made from lambskin</td>
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<tr>
<td>Use condoms with lubricant</td>
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</table>
Therefore, some couples, especially those where one partner is known to have HIV, use a barrier during oral sex to make sure that they do not spread the virus.

Does taking contraceptive (birth control) pills or having a contraceptive implanted under the skin (Norplant) prevent HIV infection? Studies of women in Africa showed that if women took “the pill” they were more likely to get HIV. This was probably because women taking the pill to prevent pregnancy were less likely to use condoms. If a woman is using the pill to prevent pregnancy, do not forget to remind her that it does not protect against HIV or other STDs. She should still practice safer sex!

Have sex less often

Whenever people have unsafe sex they risk spreading HIV. Decreasing the number of times people have sex decreases their risk of getting or giving HIV.

**Women in Brazil hold a “sex strike”**

In Palestina, a small town in Brazil, women became concerned about HIV. They thought that men in the town were at risk for HIV infection because they had multiple partners. The women decided to have a “sex strike” to stop the spread of HIV. The women stopped having sex with their husbands and boyfriends until their partners were tested for HIV.
For example, if a person has vaginal sex twenty times a month with someone with HIV, he has a higher chance of getting HIV than if he has vaginal sex four times a month.

It is hard for people to stop having sex, but it may be possible for them to lower the number of times they have sex, or to lower the number of times they have unsafe sex. If a woman’s husband has many outside partners, you can suggest that she ask her husband to use condoms. She can also reduce the amount of sex that she has with her husband. This way, if he does get HIV, she will have less of a chance of becoming infected herself. If people change parts of their sexual behavior, such as how often and what type of sex they have, they can lower their risk of getting HIV. In fact, people can have sex as many times as they want without spreading HIV as long as the sexual acts are safe. Knowing this may make changing sexual behavior easier.

### Will I get HIV by having sex?

Answering these questions can help people understand their risk of getting HIV.

1. **What is the chance that my sexual partner has HIV?**
   - Does he come from a community with a lot of HIV?
   - What has been his risk of getting HIV over the past ten years? (Has he had many sexual partners? Has he had unsafe sex? Has he injected drugs and shared needles? Has he had a blood transfusion?)
   - What are the chances that his past sexual partners had HIV? (Did they have many sexual partners? Did they inject drugs? Were any of them sex workers?)

2. **Do I or my sexual partner have a sexually transmitted disease?** Syphilis, herpes, chancroid, gonorrhea, chlamydia, and other STDs increase the chance that HIV will be spread.
   - Have I had pain when I urinate, or have I had pus come from the head of my penis or from my vagina?
   - Do I have a sore on my vagina, penis, or anus?
   - Does my partner have a sore on her vagina? On his penis?

3. **What type of sex am I having with my partner?** Anal and vaginal sex have a higher risk of spreading HIV than oral sex. Touching and dry kissing have no risk.

4. **Do my partner and I use any barrier protection?** Condoms, plastic, and latex wraps can be used to prevent the exchange of body fluids.

5. **How many times have I had sex with my partner?** The more frequently someone has sex with a person who has HIV, the greater the chance that HIV will be spread.
Other factors that affect the spread of HIV

People who have HIV do not seem to have the same amount of virus in their body fluids at all times. Health workers believe that people who are in the very early or very late stages of HIV infection—people who have just been infected and people who are sick with AIDS—are more likely to spread the virus than those who have HIV but no symptoms. Unfortunately, there is no easy method for finding out how much HIV is in a person’s body fluids. All people with HIV, and all people whose partners may have HIV, should always take care not to spread the virus.

Answering Olga’s questions

“Can I get AIDS from cleaning the rooms of German and American visitors? Should my husband and I use condoms to avoid giving each other AIDS?”

Olga is worried about AIDS but does not understand how AIDS is spread. You can help Olga by explaining that HIV is only spread by having body fluids such as blood, semen, or vaginal fluid enter the body. This means that she cannot get AIDS from cleaning the rooms of foreigners, even if they have AIDS. If neither Olga nor her husband has HIV, and if they only have sex with each other, then they do not need to use condoms during sex. They are considered an HIV-sheltered couple. You can tell Olga and her husband that they can avoid HIV in the future by not having sex with other people, by not sharing needles, and by not getting transfusions of blood that has not been tested for HIV.