LESSON 7

Practical HIV Education through Football Sessions
Football Session 1 - Roles & Responsibilities of a YDF Coach - Checklist

WARM UP

20 MINUTES

1 Ball for every player
8 Cones

MAIN PART

50 MINUTES

2-3 Ball for every pitch
12 Cones
Bibs for half the players

2 Goals (4 optional)
10-20 obstacle course items (depending on difficulty)

CONCLUSION

20 MINUTES

2 Goals for every pitch

2-3 Balls for every pitch
6 Cones for every pitch
Bibs for half the players
WARM UP
20 MINUTES

PHASE 1

Dribble-course
- A cone goal is set up halfway between 2 groups that stand opposite each other (A).
- A player from one side then dribbles through the cone-goal towards the opposite team-mates.
- Initially the exercises will be easy, e.g. dribbling only with the stronger foot. Then the difficulty will be increased, e.g. dribbling with the weaker foot or swinging between both feet.
- A slalom-course will increase the difficulty (B).

PHASE 2

“Criss-cross”
- Half the players line up on the one line, the other half lines up on the opposite line (A).
- Each player has a ball.
- On command all of them run to the opposite side, taking care not to hit any of the other players.

Variations
- The players line up along the lines of all four sides of the pitch (B).
- Each player has a ball.
- On command all of them run to the opposite side.
- This time the players have to be very alert not to collide with any of their team-mates. There will be players coming from the front, the right side and the left side!
MAIN PART
50 MINUTES

PHASE 1

4-on-4 against 2 goals each
- Erect 2 small goals on the outer lines.
- Each team tries to score as many goals as possible.
- Multiple goals = multiple options to score or lose!
  The players have to be alert and not let their guard down.
- It is important that they work together as a team!
  The players must be able to rely on their teammates and must also be reliable themselves!

Motivating Story

Phase 2

The teams met to play football, but then one player had to hurry home, as his mother is sick with AIDS and he must look after his small sister.

His team is now at a numerical disadvantage and the players must give it their all to be able to win the game.

PHASE 2

Team reduced through HIV/AIDS Circumstances
- 2 teams (4-on-4 to 8-on-8, etc.) on a pitch with 2 goals plus goalkeeper.
- Beside the pitch a dribbling/running course.
- 2 teams (A + B) play football against each other.
- After a few minutes a player of one team will be taken out. That team now has a numerical disadvantage of 3-on-4.
- The player that has left the pitch now runs through a technique course next to the playing field.

After the player has successfully passed through the course, he/she may rejoin the team.

Variations
- Nearly 20% of the South African population is infected with HIV/AIDS, therefore, every fifth player chosen cannot return to the team. The player is out of the match.
- After passing the course, the player may only assist the goalkeeper.
CONCLUSION

20 MINUTES

GAME

Standard Football Game
- 2 teams each with a goal + goalkeeper

COOLING DOWN

BALANCING, EXERCISE AND STRETCHING OF THE FRONT BODY MUSCLES

Bending the body backwards diagonally while standing ❌
Overstraining of the lumbar spine through the forming of a hollow back and the turning movement.

While lying on the back stretch the arms behind the head. Keep the arms stretched and the hands close to the floor. To support the spine, put a flat cushion or towel under the lumbar region.

STRENGTHENING OF THE MUSCLES OF THE BACK AND SHOULDERS

Throwing the ball while lying on the stomach ❌
Strong hollow back position and extreme straining stress the lumbar spine.

Kneel down and support yourself on slightly bent arms. Stretch the right leg and the left arm horizontally, but not higher. Then repeat with the other side of the body.
Practical HIV Education through Football Sessions
Football Session 2 - What is HIV and What is AIDS - Checklist

**WARM UP**
- 20 MINUTES
- 1 Ball for every player
- 4 Cones
- 1 copy "True or False?" WS 3-1 and answers WS 8

**MAIN PART**
- 50 MINUTES
- 1 Ball for every player
- 10 Cones
- Bits for half the players
- 1 Goal

**CONCLUSION**
- 20 MINUTES
- 2-3 Balls for every pitch
- 6 Cones for every pitch
- Bits for half the players
- 2 Goals for every pitch
Practical HIV Education through Football Sessions
Football Session 2 - What is HIV and What is AIDS

WARM UP
20 MINUTES

PHASE 1

"True or False?" Dribbling
- Players dribble around in the mixed zone, each with their own ball. The coach, from outside the playing area, gives advice on how they should dribble.
- The coach then shouts out a statement about HIV/AIDS from his statement list. As quickly as possible, the players have to dribble with their ball to the "correct-answer-field". After every player has reached a field, the coach gives the right answer and a short explanation. The players, who got the answer wrong, have to do an additional exercise as a penalty (push-ups, knee-bends, etc.).
- The last player to have reached a field, even if it was the correct field, also has to do the additional exercise.

Variations
- At the beginning of the game, every player has 3 points. For every wrong answer, or being last on the answer-field, he loses a point. Players with 0 points will be dropped from the game. All players who still have all 3 points at the end of the game are the winners.

PHASE 2

Spurs
- Sprint exercises at 80-90%.

The various rounds describe the progress of the sickness from the infection with HIV to the outbreak of AIDS.

1st Round: from standing position

2nd Round: from squatting position

3rd Round: lying face down

4th Round: lying face up

5th Round: pick-a-back

Be Careful
**MAIN PART**

50 MINUTES

**PHASE 1**

"Yes or No?"
- Two groups of players line up opposite each other, 3-4m apart and 10m away from the ‘answer’ lines.
- The coach asks a question. If the answer is ‘No’, all the players run as quickly as possible toward the left line.
- The players in the back, the ones furthest away from the correct ‘answer’ line have to try and catch the players in front of them before they reach the line.
- If the answer is ‘Yes’, then the roles are reversed.

**Variations**
- Do the exercise while dribbling a ball with the feet.
- Do the exercise while dribbling a ball with the hands.

In "True or False?" or "Yes or No?" games, the players should make their own decisions and stick to them.
One team is infected with HIV.

Initially this has no effect on the game, as the virus is not yet so bad (stage 1 & 2). In stage 3 the team is now weakened, due to the sickness breaking out and affecting the immune system.

Then, in stage 4, the sickness breaks out completely. The team is now considerably weakened and can hardly defend itself.

**Game-form 4-on-4**
- Game 4-on-4, also 5-on-5 or 6-on-6 possible.
- During stages 1 and 2, both teams are equal and play under the same conditions.
- In stage 3 one team plays with an additional cone-goal.
- In stage 4 the game is made more difficult by adding a large goal in which a goalkeeper has to be placed. This means the one team now only has three (+one) players.
CONCLUSION

20 MINUTES

GAME

Standard Football Game
- 2 teams - each with a goal + goalkeeper.

COOLING DOWN

STRENGTHENING OF THE STOMACH MUSCLES

- Leg circles and leg scissors while lying on the back
  - Especially in people with weak stomach muscles, the long lever action in conjunction with the weight of the legs causes a strong hollow back. Apart from that, the hip-flexors are further strengthened, which are quite strong in most athletes anyway.
  - Lie on the back with the slightly bent legs pointing upwards. Then lift the pelvis from the floor without the legs moving towards the head.

STRENGTHENING OF THE STOMACH MUSCLES

- Sit ups
  - Too much pressure on the lumbar spine. The hip-flexors mainly exercised.
  - Lie on the back. Place the lower legs on e.g. a stool so that the thighs are vertical and the lower legs are horizontal. Slowly roll the head and shoulders off the floor until the hands reach the stool.

STRENGTHENING OF THE DIAGONAL STOMACH MUSCLES

- Swinging the legs sideways while lying on the back
  - Overstraining of the lumbar spine through the forming of a hollow back and the turning movement.
  - While lying on the floor cross the slightly bent legs. Lift the shoulders from the floor and alternate between pressing the right hand against the left knee, and pressing the left hand against the right knee.
LESSON 7

Practical HIV Education through Football Sessions
Football Session 3 - HIV Transmission and Prevention - Checklist

WARM UP

20 MINUTES

- 1 Ball for every player
- 4 Cones
- 1 copy "True or False?"
  WS 3-1 and answers
  WS 8

MAIN PART

50 MINUTES

- 1/2 Pitch
- 1 Ball for every player
- 3 Cones
- Bats for half the players
- 2 Goals
- 20 obstacle-course planks / bars
- 6 Cones in 3 different colours

CONCLUSION

20 MINUTES

- 40m per Pitch
- 2-3 Balls for every pitch
- 5 Cones for every pitch
- Bats for half the players
- 2 Goals for every pitch
- 2 Goals for every pitch
WARM UP

20 MINUTES

**PHASE 1**

"Game of Catch" (without ball)
- In a marked off area two catchers try to tag the other team-mates.
- One player wears a yellow bib, the other a red bib.
- If the player with the yellow bib strikes another player that player must stand still for a short time and may then carry on playing.
- If the player with the red bib strikes another player that player must get a red bib from the coach and is now also a catcher.

**Variations**
- Cones or tyres can be scattered across the pitch as "safe" spots.

**PHASE 2**

"True or False?" Dribbling
- Players dribble around in the mixed zone, each with their own ball. The coach, from outside the playing area, gives advice on how they should dribble.
- The coach then shouts out a statement about HIV/AIDS from his statement list. As quickly as possible, the players have to dribble with their ball to the "correct-answer-field". After every player has reached a field, the coach gives the right answer and a short explanation. The players, who got the answer wrong, have to do an additional exercise as a penalty (push-ups, knee-bends, etc.)

**Variations**
- At the beginning of the game, every player has 3 points. For every wrong answer, or being last on the answer-field, he loses a point. Players with 0 points will be dropped from the game. All players who still have all 3 points at the end of the game are the winners.
MAIN PART

50 MINUTES

PHASE 1

“Game of Catch” (with ball)
- In a marked off area catchers try to tag the other team-mates.
- One player wears a yellow bib, the other a red bib.
- If the player with the yellow bib strikes another player that player must stand still for a short time and may then carry on playing.
- If the player with the red bib strikes another player that player must get a red bib from the coach and is now also a catcher.

Variations
- Only yellow catchers
- Protection: to protect themselves from the catchers the players must stand next to a cone, where they may not be caught. These cones can be placed in two corners.
- Small square: it is also possible to mark off a further square within the original square and then place players in that square, who may only move around in that area.

Motivating Story

The yellow catcher only has HIV, if the player is infected it initially has no effect on the player. But the red catcher has AIDS - whoever comes into contact with this catcher also becomes AIDS infected.

Through certain measures the players can protect themselves against AIDS (and even HIV), that is why the players who stand next a cone cannot be infected.

The risk of infection in the smaller square is much higher, as these players take drugs and are therefore restricted in their movements.
**PHASE 2a**

**Shout out the Risks of HIV/AIDS**

*Fight against the risks of HIV/AIDS*

- Depending on the number of players, you need 1 or 2 goals (see above).
- Mark a shooting zone (10m-20m distance from the goal, depending on the players age and ability).
- Only the goalkeeper is able to get points!
- The player dribbles into the shooting zone and tries to shoot a goal. If he / she succeeds, he / she will go into the goal as the new goalkeeper. If he / she misses, the goalkeeper gets 1 point and the player has to line up behind the other players.
- When a player reaches the shooting zone, he / she has to shout out a risk of contracting HIV/AIDS (e.g. unprotected sex). The goalkeeper has to prevent this risk from getting into the goal and tries to catch the ball.
- Vary the statements - do not repeat!
- Whenever a player does not score a goal, the goalkeeper gets a point. If the ball gets into the goal, the goalkeeper has to leave the goal and line up behind the other players. Which player gets the most points?

**Variations**

You can also turn this game around.

- The scorer has to shout out how to protect himself against HIV/AIDS (e.g. safe sex).
- For every goal a player scores, he / she will get a point.

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**PHASE 2b**

**Competition**

- 2 pitches with obstacles are set up - players without balls
- Exercises: e.g. running-ABC over poles will be performed by the players on these pitches.
- The coach calls out a statement concerning risks of HIV infections and the number of a player.
- Various distances are marked through cones. The players have to shoot form the line they believe to be correct.
  1. 1st Cones (Green) = No Risk
  2. 2nd Cones (Yellow) = Low Risk
  3. 3rd Cones (Red) = High Risk
- Score 2 points for the correct distance (line!) and goal; 1 point for the correct distance.

*By having many actions to complete in this exercise, the players have to be alert. They have to listen to what the coach says.*
CONCLUSION

20 MINUTES

GAME

Standard Football Game
- 2 teams - each with a goal + goalkeeper.

COOLING DOWN

FLEXIBILITY OF THE CERVICAL SPINE

Circling the head
- Overstraining of the joints, ligaments and interspinal discs, as the cervical spine is not suited for such turning movements.

Bending the head to the sides, tilting it to the front and slightly to the back and turning it to the left and to the right are the natural movements of the head and therefore the cervical spine.

Afterwards
- EASY JOGGING - 10 MIN
- JUGGLING - 10 MIN
- STRETCHING - 10 MIN
LES 7

Practical HIV Education through Football Sessions
Football Session 4 - Social Drivers of HIV and AIDS - Checklist

WARM UP

25 MINUTES

1 Ball for every player
7 Cones
Blindfolds / Scarves

MAIN PART

45 MINUTES

1 Ball for every player
16 Cones
1 Goal

CONCLUSION

20 MINUTES

2-3 Balls for every pitch
6 Cones for every pitch
Bibs for half the players

2 Goals for every pitch
WARM UP
25 MINUTES

PHASE 1

"Stick with your Partner"
- All players move around a marked off square without a ball (A).
- The coach gives them various exercises that always have to be executed with the same partner.

Possible exercises with the partner:
- high-five with both hands,
- vaulting,
- crawl through the legs...

Variations
- Do the same exercise with a ball (B).
- Possible exercises with the partner
  - passing
  - header passes
  - passing through the legs...

PHASE 2

"Trust your Partner"
- A square inside a marked area is marked off.
- A blindfolded player has to collect balls and dribble them into the marked off square with the help of his partner, who is not blindfolded.

Being able to trust your partner is very important in a world with HIV/AIDS.

To build trust takes time and when one jumps from partner to partner, trust will never have time to develop in those relationships.
Practical HIV Education through Football Sessions
Football Session 4 - Social Drivers of HIV and AIDS

MAIN PART
45 MINUTES

PHASE 1

Safe-zone Activities
- Four small playing fields are marked off.
- All the players are in one playing field.
- On a command by the coach they all have to change into another field and perform a certain exercise:
  - Field 1: Hold the ball up into the air (4-5 balls, groups of two or three, depending on the number of players)
  - Field 2: Relax, e.g. shake out the legs (break for drinking, if water or juice available!)
  - Field 3: All players pass the ball to each other (also 2-3 balls possible!)
  - Field 4: Every player receives a ball (various exercises)
- This exercise is carried out until the coach names another field.
- While changing from one field to another, the coach can strike off the players!

Motivating Story

The players are protected against the infection while they are in the fields, as they abide by certain rules.
- Field 1: Use of a condom
- Field 2: No alcohol and/or drugs
- Field 3: "Harmony"
- Field 4: Medication
Goal-kick
- Place a row of cones in front of a goal with goalkeeper.
- The players have to run towards the goal, passing the ball between them and then going for a shot at goal.
- The same 2 players should always be partnered together - if one knows the partner one can develop knowledge about and trust in your partner.

1st Round: return pass, two contacts
2nd Round: return pass, direct
3rd Round: return pass, play towards the wing, then cross and goal-kick
4th Round: further variation possibilities

In this day and age, having a healthy relationship also means knowing the status of your sexual partner. Your life quite literally depends on it!
CONCLUSION

20 MINUTES

GAME

Game with 2 Passers behind the Goals
- Standard football game: 4-on-4; 5-on-5, etc.
- Two additional players, for each team, stand behind the opponent’s goal-line
- The players can pass the ball to the passer, who in turn then passes it back to the player or any other player on their team.

Variations
- Either team can use the passers behind the line, the passers are not part of any of the two teams.

Remember - even people who are not part of your situation can still be turned to for support - like the passers in this exercise.
COOLING DOWN

STRETCHING THE MUSCLES OF THE BACK AND BACK LEG MUSCLES

- Body bend with legs extended and in straddle position
  - Considerable pressure on the lower back (lumbar vertebrae)
  - While lying on the back leave one leg stretched on the floor and lift the other leg high up. Grip the lifted leg at the upper thigh and pull it toward the chest. Pull in the point of the foot, while leaving the other leg stretched on the floor. Relax the arms and stretch the leg. Hold this position.

FLEXIBILITY OF THE HIP-JOINTS AND STRETCHING OF THE BACK THIGH MUSCLES

- Hurdle squat
  - Overstretching of the medial ligaments in the angled knee-joints and overs stressing the medial meniscus. Non-functional strain on the lumbar spine
  - Stand on the slightly angled supporting leg and stretch the other leg to the front resting on the heel. Pull up the tip of the foot and slowly push the pelvis to the back until the stretching is noticeable in the back thigh muscles. The back remains straight.

Afterwards

FOOTBALL-TENNIS - 10 MIN

No-go-zone
Practical HIV Education through Football Sessions
Football Session 5 - Treatment, Care and Support of People Infected and Affected by HIV and AIDS - Checklist

LESSON 7

WARM UP

20 MINUTES

- 30m
  - 2-3 Balls
  - 5 Cones
  - Bibs for half the players

MAIN PART

50 MINUTES

- 1/2 Pitch
  - 1 Ball for every player
  - 8 Cones
  - Bibs for half the players

CONCLUSION

20 MINUTES

- 40m per Pitch
  - 2-3 Balls for every pitch
  - 4 Cones for every pitch
  - Bibs for half the players

- 30m per Pitch
  - 2 Goals for every pitch

WARM UP

20 MINUTES

PHASE 1

Handball
- A standard game of Handball at two large goals with “Ghost” (visible through bib).

PHASE 2

Corner
- A game of 5-on-1.
- The “Ghost” is hidden; every player is briefly assigned “the role”.

Important
- Subsequent reflection by the coach!
- This game should only be played once per group!
- During a further training unit the ‘Outsider Game’ (see PHASE 2 ALTERNATIVE) could serve as an alternative.

Variations
- Play the games with two ball contacts...
- Or direct play.
- The side-lined player is not informed that he will be ignored by the other players. All the other players are informed. It will be a 5-on-1 game, whereby the ghost-player will not be passed to.

PHASE 2 ALTERNATIVE

Outsider Game
- Two teams play against each other.
- Both teams have an outsider who will not be included in the course of the game. Their teammates do not pass the ball to them.
- After 5 minutes, the outsider tells the other players what kind of feeling not getting the ball and being an outsider is.

Motivating Story

At the beginning of training one player is given a bib and for the next ten minutes is a “ghost”. During this time various small exercises are performed, where the “ghost” has to be purposefully disregarded by the other players.

People with AIDS are often ostracized by the community.
**MAIN PART**

50 MINUTES

**PHASE 1**

"Taking of Medication" incl. goal-shot
- The players are divided into 3 groups.
- Every group represents a time of day:
  - 8 o'clock in the Morning
  - 12 o'clock Noon
  - 6 o'clock in the Evening
- All players freely move around a marked off square, in the centre of which the balls have been placed.
- When the coach calls out a certain time of day, all players take a ball. The players belonging to the group of that particular time dribble out of the square and shoot at the goal.
- As soon as all players are back in the square, all balls are placed in the centre again.

 whoever has AIDS can still live a normal life, provided he always takes his/her medication regularly and at the same time. The shot at goal stands for the punctual taking of the medication.

**PHASE 2a**

Division through sprint (5 - 15 metres)
- 4 x group of 2 (losers get a bib)
- 2 x group of 3 (losers also get a bib)
- The 14 players will now have been divided into a 'strong' group of 8 and a 'weak' group of 6.

**PHASE 2b**

8-on-6 Game
- The team with the bibs (they play with numerical disadvantage) symbolize the "diseased group".
- Game: Numerical Advantage against Numerical Disadvantage at two or four goals.
CONCLUSION

20 MINUTES

GAME

Standard Football Game
- 2 teams - each with a goal + goalkeeper.

COOLING DOWN

STRETCHING THE MUSCLES OF THE BACK AND BACK LEG MUSCLES

Body bend with legs extended and in straddle position
- Considerable pressure on the lower back (lumbar vertebrae)
- While lying on the back leave one leg stretched on the floor and lift the other leg high up. Grip the lifted leg at the upper thigh and pull it toward the chest. Pull in the point of the foot, while leaving the other leg stretched on the floor. Relax the arms and stretch the leg. Hold this position.

FLEXIBILITY OF THE BODY, STRETCHING OF THE BACK THIGH MUSCLES AND STRETCHING THE MUSCLES OF THE BACK

Diagonal body bend
- Rocking and bouncing do not effect any stretching of the muscles. Twisting the spine causes increased strain in the lumbar region.
- Kneel down and support yourself on slightly bent arms. The arms and legs are apart by the width of the shoulders. Press the spine upwards and arch your back like a cat.

Afterwards

SHOOT OUT 1-ON-1 - 10 MIN

- Use cones as goals / targets
- Players are not allowed to defend their own cone
LESSON 7

Practical HIV Education through Football Sessions
Football Session 6 - Working with People Living with HIV and AIDS - Checklist

WARM UP

- 20 MINUTES

- 25m
- 15m
- 1 Ball for every player
- 4 Cones
- Bibs

MAIN PART

- 45 MINUTES

- 40m
- 30m
- 2-3 Balls
- 6 Cones
- Bibs for half the players
- 1 Goal

CONCLUSION

- 25 MINUTES

- 40m
- 30m
- Pitch x2
- 2-3 Balls for every pitch
- 6 Cones for every pitch
- Bibs for half the players
- 2 Goals for every pitch
WARM UP
20 MINUTES

PHASE 1

Dribbling on the Field
- The players dribble around in a marked off area.
- Every player has a ball
- Injury! The ‘injured’ player must first be bandaged (bits are lying next to the playing field and will serve as bandage!)

PHASE 2

The Virus-chain
- All players move about in a marked off area.
- One player starts the game by touching or catching (infecting) one of the other players.
- Once the ‘Catcher’ has caught another player, he/she will now form part of a ‘virus-chain’ with the catcher.
- By holding hands the ‘virus-chain’ of two catchers will now try and ‘infect’ more players.
- Once the chain is ‘four catchers’, it will split into two new chains with two catchers per chain. Now the virus spreads around faster.
- The winner of the game is the last player not part of a chain - the only player to remain healthy!
MAIN PART

45 MINUTES

PHASE 1

Game with Handicapped Player
- Game with two teams and one neutral player (with and without handicap), who can play in whichever team has the ball.
- The aim is to keep the ball in the own team.

Motivating Story
The HIV infected or sick (AIDS) player must be positively acknowledged by the other players and must / may therefore play in the team that has the ball.

PHASE 2

3-on-3-on-3 + 1
- 3 groups of 3 players each and 1 neutral player play against one large goal, with goalkeeper and two “counter-goals” for the defence.
- 2 groups face each other on the pitch while the third group stands behind the lines.
- One of the teams on the pitch is the attacking team while the other team is the defending team.
- Rotation: the attacking team is replaced by the waiting team and is now the defending team.

Important!
- Always exchange the neutral player!
CONCLUSION

25 MINUTES

GAME

<table>
<thead>
<tr>
<th>Round 1</th>
<th>Round 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pitch 1</td>
<td>Pitch 1</td>
</tr>
<tr>
<td>Team A vs Team B</td>
<td>Winner Pitch 1 vs Winner Pitch 2</td>
</tr>
<tr>
<td>Pitch 2</td>
<td>Pitch 2</td>
</tr>
<tr>
<td>Team C vs Team D</td>
<td>Loser Pitch 1 vs Loser Pitch 2</td>
</tr>
</tbody>
</table>

Mini-tournament Game
- 2 pitches with 2 goals each.
- 4 teams consisting of 4 players and 1 goalkeeper.
- The teams play against each other in two separate 4-on-4 games.
- The winners of round 1 face each other, as do the losers of that round, in a match that will determine the overall rank.

COOLING DOWN

PASSING THE BALL - 10 MIN
- Pass the ball to each other in the form of a 1+1, 4 players together, the whole team together with passing 3 or 4 balls at the same time

STRETCHING - 10 MIN
If YDF coaches are going to contribute to HIV prevention, the support of people living with HIV and AIDS, and to help breakdown the prejudice and stigma around the disease, they must have accurate and comprehensive knowledge of HIV and AIDS. Coaches can test their knowledge of HIV and AIDS by completing the questionnaire in the Lesson 8 Work Sheets.

YDF Coaches are not expected to be experts in HIV and AIDS or to be counsellors. Instead we would expect coaches to know their communities and to know where the members of that community would be able to access support and counselling on HIV and AIDS. YDF coaches should therefore network and establish relationships with health clinics, community based HIV and AIDS organisations, local support groups and others working to reduce HIV transmission and to support those living with HIV and AIDS.

Codes of Conduct

Codes of Conduct are a useful way of getting coaches and teams to buy in to HIV and AIDS prevention.

In considering how YDF coaches should conduct themselves when working with youth (boys and girls) in respect of the prevalence of HIV and AIDS, we have developed the following short code of conduct. Consider this list and add any additional guidelines that you feel should be included in such a code.

**Code of Conduct for YDF Coaches**

- The YDF Coach must respect the rights, dignity, worth and right to self-determination of all youth (boys and girls) that they work with. YDF Coaches must treat all young people equitably and sensitively, within the context of football and their ability, regardless of gender, ethnic origin, cultural background, sexual orientation, religion, or health status.

- The YDF coach will be concerned with the health, well-being, safety, protection and future of each young player. YDF Coaches seek a balance between the development of football ability and the social, emotional, intellectual and physical needs of the individual young person.

- The YDF Coach should act as a positive role model for young people and ensure that their behaviour reflects best practice on and off the football field. YDF Coaches must consistently display high personal standards, and project an image of health, cleanliness and functional efficiency.

- The YDF Coach should never smoke while coaching. YDF Coaches should not drink alcohol so soon before coaching that it would affect their competence to coach, compromise the safety of the young players or obviously indicate they had been drinking (e.g. smell of alcohol on breath). YDF Coaches should not use drugs recreationally.

- The YDF Coach has a duty to protect children (young people under the age of 18 years) from harm and abuse and should know what the reporting procedures to use where the feel a child may be subject to abuse or harm.
The YDF Coach has a responsibility to ensure as far as possible the safety of the young people they work with. All reasonable steps should be taken to establish a safe working environment. Activities undertaken should be suitable for the age, physical and emotional maturity, experience and ability of the young player.

The YDF Coach should use football activity to encourage positive behaviour in young people towards HIV prevention and to develop young people’s comprehensive knowledge of HIV. This includes encouraging abstinence, faithfulness to one person and the use of condoms as means of preventing the spread of HIV and discouraging early sexual debut, multiple and concurrent partners, inter-generational and transactional sex, the misuse of alcohol and drugs, and gender based violence.

The YDF Coach should never abuse their position by having sexual relations with anyone under the age of 18 years of age, nor should they use their position to pressurise young people who are 18 years and older to have sexual relations with them.

The YDF Coach should never discriminate, nor tolerate discrimination, against any person living with HIV and should ensure their activities are inclusive of people living with HIV.

The YDF Coach must keep personal information about the young players they work with confidential including information regarding a young person’s HIV status. Confidentiality does not preclude the disclosure of information about a young player to persons who can be judged to have a right to know such as in pursuit of action to provide essential medical care to a child or to protect children from abuse.
We have also developed the following short code of conduct for teams. Consider this list and add any additional guidelines that you feel should be included in such a code.

**Code of Conduct for Team Players**

- YDF Players should take responsibility for developing their football skills and physical fitness; for proper nutrition and the avoidance of smoking, alcohol, and social drugs; for safeguarding their health and wellbeing; and for behaving appropriately and with respect to others in practice, in matches and off the field.

- YDF Players should act as a positive role models in their communities. They should reflect appropriate behaviour on and off the football field and be a positive example to other young people.

- YDF Players should make every effort to help their team win within the rules of the game and in the spirit of fair play.

- YDF Players should know and abide by the laws, rules and spirit of the game.

- YDF Players should accept success and failure, victory and defeat, equally.

- YDF Players should demonstrate respect for their opposition and for match officials. They should avoid inappropriate words and actions, violence and rough play, and should give assistance to injured opponents.

- YDF Players should have comprehensive knowledge of the prevention of HIV and other STIs. They should practice abstinence, being faithful to one partner and use condoms. They should not engage in behaviours that put them and others at risk, such as having unprotected sex with someone whose HIV status they do not know, having sexual relations with someone under the legal age of consent, having multiple and concurrent partners, or having inter generational or transactional sex.

- YDF Players should know their rights and never feel pressured to have sexual relationship with someone they do not want to especially someone of an older generation.

- YDF Players should respect others at all times regardless of a person’s ability, gender, ethnic origin, cultural background, sexual orientation, religion, or health status.

- YDF Players should never discriminate, nor tolerate discrimination, against any person living with HIV. They have a responsibility to challenge discrimination and to help remove the stigma around HIV.
Planning to take Action

It is one thing having increased knowledge of HIV and AIDS and knowing how football can make a contribution to HIV prevention and the eradication of the stigma attached to the disease. To make a real difference we need to take action, we need to become agents of change. Using the planner (Worksheets 7 - 3 of 3), YDF coaches can plan to take action.

**Goal**

The planner asks you to set some goals, what you would like to achieve in order to make a contribution to the prevention of HIV and AIDS. This is the same as setting a goal or some objectives for a football training session. Setting a goal gives direction to the actions you will take to achieve it.

**Challenges**

Addressing HIV prevention is not without its challenges. We should be honest and identify what they might be.

**Solutions**

In planning to achieve our goals we consider the challenges and identify the different options we have. We then weigh up each solution and select the best solution that will enable us to achieve our goal.

**Will**

Finally having set your goals, identified the challenges, selected the best solution to achieve your goal, you need to consider how motivated you are to achieve the goals you have set. If your motivation or will is low it is unlikely you will see things through and achieve the goals you have set.
**Lesson 1**
**Roles & Responsibilities of an YDF Coach**

**Exercise 1: Roles of a Coach**

Here are some roles of a football coach. Can you add to further roles to the list.

- Instructor
- Mentor
- Teacher
- Manager
- Friend
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- 

**Exercise 2: Quality of a Coach**

List some of the qualities you would expect a football coach to possess.

- Approachability
- Trustworthiness
- Fairness
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Exercise 3: Responsibilities of a Football Coach

Consider the following list of football coaching responsibilities and rank these from 1 to 10 where 1 is the most important and 10 is the least important.

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>To plan activities which are appropriate for the age and stage of development of all the players.</td>
<td></td>
</tr>
<tr>
<td>To ensure the football field is safe for the footballers to play on.</td>
<td></td>
</tr>
<tr>
<td>To improve the physical fitness of the players.</td>
<td></td>
</tr>
<tr>
<td>To ensure the players have fun.</td>
<td></td>
</tr>
<tr>
<td>To involve the players in making decisions.</td>
<td></td>
</tr>
<tr>
<td>To select players and manage arrangements for matches.</td>
<td></td>
</tr>
<tr>
<td>To stop players being subjected to bullying by other players.</td>
<td></td>
</tr>
<tr>
<td>To dress as a coach and to act in a professional manner.</td>
<td></td>
</tr>
<tr>
<td>To require players to behave appropriately on the football field and show respect for other players and officials.</td>
<td></td>
</tr>
</tbody>
</table>

List below any other important responsibilities football coaches have when coaching young people.

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Exercise 4: Development of the Youth Football Player

Using the box below list some of the attributes you would expect to develop in youth playing for each of the following four characteristics:

- Technical & Tactical Qualities
- Physical Fitness
- Mental or Psychological Qualities
- Social Qualities

Are there any legal responsibilities that football coaches have when working with young people? If so list these here.
**Exercise 5: Needs & Entitlements of Children & Youth**

Children and young people have basic needs which they are entitled to have met. These include the right to play sport. These needs have been set out in various United Nations charters and in many cases are addressed nationally through laws and government policies.

List in the following boxes, what you feel children and young people have an entitlement to in terms of their needs for socialisation, for protection, for personal development and for sport.

<table>
<thead>
<tr>
<th>Social Needs</th>
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<tbody>
<tr>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Protective Needs</th>
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<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Personal Needs</th>
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</table>

<table>
<thead>
<tr>
<th>Sporting Needs</th>
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</tbody>
</table>
Exercise 1: How the Infection Progresses

List any facts you know about each of the four stages. An example would be that a person is highly infectious in the Primary Infection and AIDS stages. Also write down what you think the average duration of each stage would be.

<table>
<thead>
<tr>
<th>Stage</th>
<th>Associated Facts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Infection</td>
<td></td>
</tr>
<tr>
<td>Asymptomatic</td>
<td></td>
</tr>
<tr>
<td>Symptomatic</td>
<td></td>
</tr>
<tr>
<td>AIDS</td>
<td></td>
</tr>
</tbody>
</table>

Average Duration
Exercise 2: What do you know about the Pandemic

1. Approximately, how many people are there in the world living with HIV and AIDS?
   - A 13 Million  
   - B 23 Million  
   - C 33 Million

2. Of all the people living with HIV and AIDS what proportion are living in Sub-Saharan Africa?
   - A One Third  
   - B Two Thirds  
   - C One Quarter

3. What is the number of young people aged 15-25 who become infected with the virus every day in the world?
   - A 30  
   - B 300  
   - C 3,000  
   - D 30,000

4. Of all new infections what is the percentage of women being coming infected with HIV?
   - A 20%  
   - B 33%  
   - C 66%

5. Which country has the highest rate of infection (percentage of the population) of HIV in the world?
   - A Swaziland  
   - B Lesotho  
   - C South Africa  
   - D Germany

6. Which country has the most people living with HIV and AIDS?
   - A Swaziland  
   - B Lesotho  
   - C South Africa  
   - D Germany

7. What is thought to be the origin of HIV?
   - A An escaped virus originally created in a laboratory for biological warfare  
   - B A virus found in Chimpanzees transferring to humans  
   - C A virus found in Birds commonly known as Bird Flu

8. What impact has HIV and AIDS had on the life expectancy in Sub-Saharan Africans?
   - A Life expectancy has increased  
   - B Life expectancy has not altered  
   - C Life expectancy has decreased

9. In South Africa how many children have been orphaned as a consequence of the HIV and AIDS pandemic?
   - A 900,000  
   - B 1,900,000  
   - C 190,000

10. How many young people know how HIV is transmitted and how to prevent transmission?
    - A 4 out of 10 young people  
    - B 9 out of 10 young people  
    - C 5 out 10 young people
Exercise 3: What might a YDF coach do?

Reflect on the information in this lesson on the impact of the pandemic on young people and answer the following questions:

1. How could you as a YDF coach encourage young people to find out their status?

2. How could you as a YDF coach engage street children and help them reintegrate with their communities?

3. How could you as a YDF coach ensure that the young people you work with have comprehensive knowledge of HIV prevention?

4. How could you as a YDF coach help remove the stigma of HIV and AIDS in your football team?
Exercise 1: How do people contract the virus.

Read the following statements and decide whether you think the statements are true or false. Once you have completed the list, check over the page to see if your answers were right or wrong. To improve your knowledge of how people contract HIV read through the underpinning knowledge section of this lesson.

1. If you are with a person who is HIV positive you can contract HIV if they sneeze or cough over you.  
   - True  
   - False

2. You can contract HIV if you have unprotected sex with someone who is HIV positive.  
   - True  
   - False

3. You can only contract HIV through Anal sex with a man or a woman.  
   - True  
   - False

4. Mothers can pass HIV to their babies through breast feeding?  
   - True  
   - False

5. HIV can be contracted if you are taking social drugs and sharing needles with others who may include individuals who are HIV positive.  
   - True  
   - False

6. You can get contract HIV if you use condoms during sex as they contain the virus.  
   - True  
   - False

7. You can contract HIV by kissing someone who is infected with HIV.  
   - True  
   - False

8. A woman can contract the virus by having oral sex with an HIV positive man.  
   - True  
   - False

9. A man cannot contract HIV by having oral sex with a woman who is HIV positive.  
   - True  
   - False

10. If you use a toilet after someone with HIV, you risk picking up the virus from the toilet seat.  
    - True  
    - False
Exercise 2: High, Low or No Risk

Consider the following and decide whether they represent a high, low or no risk of contracting HIV. Write your answers in the columns provided below. As an example we know that the HIV does not survive outside the body and therefore there is no risk of contracting the virus simply by holding hands with a person who is HIV positive. Holding hands would therefore be placed in the no risk column.

<table>
<thead>
<tr>
<th>High Risk</th>
<th>Low Risk</th>
<th>No Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Holding hands</td>
<td>Hugging</td>
<td>Using a condom with half of your partners</td>
</tr>
<tr>
<td>Wet kissing</td>
<td>An HIV positive mother breast feeding her child</td>
<td>Riding in a car</td>
</tr>
<tr>
<td>Mosquitoes</td>
<td>Sharing eating utensils</td>
<td>Dancing with someone</td>
</tr>
<tr>
<td>Unprotected vaginal sex</td>
<td>Dry kissing</td>
<td>Sharing razors</td>
</tr>
<tr>
<td>Shaking hands</td>
<td>Oral sex</td>
<td>Kissing on the cheek</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Spitting</td>
</tr>
</tbody>
</table>
Exercise 3: Myths in Your Community

List any commonly held beliefs in your community about how you can contract HIV that you know are simply not true.

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Exercise 4: ABC of Prevention

The following table shows the ABC of HIV prevention, Abstinence, Being Faithful, and Condomising. Using the table list some of the challenges that young people have in adhering to the ABC strategy.

<table>
<thead>
<tr>
<th></th>
<th>Challenges for Young People</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Abstain</td>
</tr>
<tr>
<td>B</td>
<td>Be Faithful</td>
</tr>
<tr>
<td>C</td>
<td>Use Condoms</td>
</tr>
</tbody>
</table>
Exercise 5: Condom Use

The following are statements that men often use as excuses for not using condoms. Consider each reason and put forward a response that would encourage condom use.

1. Condoms are not safe they could be contaminated with HIV.
   Response

2. Wearing a condom is no good, it kills the good feeling of having sex.
   Response

3. Condoms are a waste of time, they have tiny holes in them that let the virus through.
   Response

4. If I stop to put on a condom I will lose my erection.
   Response

5. I am allergic to latex and cannot use condoms.
   Response
Exercise 1: Social Drivers of HIV and AIDS

Make a list of the social factors that contribute to the spread of HIV.

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- 
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- 
- 

Exercise 2: Age of Consent

What is the age of consent for boys and girls in your country?

- Boys - 
- Girls - 

At what age can you legally become married in your country?

Exercise 3:

The following are strategies that address some of the social drivers of HIV and AIDS.

List one action for each that you as a football coach or your football club or organisation could do to help implement this strategy.

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Challenges for Young People</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase awareness in communities of the rights of children and empowering communities to protect children and young people</td>
<td></td>
</tr>
<tr>
<td>Provide opportunities for boys and girls to stay in education</td>
<td></td>
</tr>
<tr>
<td>Provide access to health services especially for young women</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Improve comprehensive knowledge of HIV prevention in young people and adults</td>
<td></td>
</tr>
<tr>
<td>Provide young people with education around the dangers of substance abuse</td>
<td></td>
</tr>
<tr>
<td>Provide safe places for children to play and engage in positive purposeful activities such as sport, art, drama, music, etc.</td>
<td></td>
</tr>
<tr>
<td>Promote women’s rights, gender equality and the empowerment of women</td>
<td></td>
</tr>
<tr>
<td>Promote respect for women amongst men and boys</td>
<td></td>
</tr>
<tr>
<td>Involve people living with HIV and AIDS in actions to address HIV and AIDS and in decision making around HIV and AIDS at all levels</td>
<td></td>
</tr>
<tr>
<td>Reduce the stigma of HIV and AIDS and to eliminate discrimination against people living with HIV and AIDS</td>
<td></td>
</tr>
</tbody>
</table>
Exercise 1:

Consider the lifestyle of an outstanding sportsperson and make a list of the practices you would expect of such a person.

- Takes regular exercise
- Doesn’t smoke

Exercise 2:

Make a list of those people you need in your support team at your football club in column A. In column B list those people who might form the support team for a person living with HIV.

<table>
<thead>
<tr>
<th>A - Football Support Team</th>
<th>B - HIV Support Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team manager</td>
<td>My partner</td>
</tr>
<tr>
<td>Groundsman</td>
<td>My best friend</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Exercise 3:

Make a list of the benefits of physical fitness for a footballer in column A and in column B, the benefits to someone living with HIV improving their physical fitness.

<table>
<thead>
<tr>
<th>A - Footballer</th>
<th>B - Person living with HIV</th>
</tr>
</thead>
<tbody>
<tr>
<td>✅ Will be able to play a full game without becoming tired.</td>
<td>✅ Will feel healthier and better about themselves.</td>
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</tbody>
</table>
Exercise 4:

Consider the following types of food. Now consider the foods that you eat. Make a list of the types of food you eat often under each of these categories.

<table>
<thead>
<tr>
<th>Fruit and Vegetables</th>
<th>Bread, other cereals and potatoes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meat, fish and alternatives</td>
<td>Foods containing fat</td>
</tr>
<tr>
<td>Food and drinks containing sugar</td>
<td>Milk and dairy foods</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Milk and dairy foods</th>
<th>Meat, fish and alternatives</th>
<th>Fruit and vegetables</th>
<th>Bread, other cereals and potatoes</th>
<th>Foods containing fat</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>
Lesson 5
Treatment, Care and Support of People Infected and Affected by HIV and AIDS

Exercise 5:

Make a list of things you can do to avoid opportunistic infections:

- Bath daily with soap and water
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Exercise 1: Rights & Responsibilities

Consider what the rights of a person living with HIV or AIDS might be. Remember all human beings should enjoy the same basic human rights regardless of their gender, ethnic origin, cultural background, sexual orientation, religion, or health status. Make a list here of some basic rights that they should enjoy.

Rights

With rights come responsibilities. So what responsibilities do people living with HIV and AIDS have? Make a list here of some responsibilities that they should undertake.

Responsibilities
Exercise 2: Role Plays

Role Play 1

Two people take part in this role play. One plays the role of a football coach or manager and the other plays the role of a young player who has just discovered they are HIV positive and does not know who they can tell. This young person decides the coach is the only person they can confide in and wants to tell the coach.

The person playing the role of the player must disclose their status to the coach and share their concerns. The person playing the role of the coach must be supportive and give sound advice.

Role Play 2

Four people take part in this role play. One is a player who will be telling his friends something about HIV that is a myth i.e. it is not true. Two people play the role of two other players who are listening to what the first player is saying. The fourth person is a football coach who hears what is being said and must challenge the myth and correct the players understanding.

First decide who will be the active player and the active coach. The two others must be listening players. The person who is the player telling the myth must think of something to tell the two listening players that they no is a myth and is not true. The fourth person playing the coach, must listen to what is being said and then challenge the myth in an appropriate way that helps the young players understand what the truth is.
Exercise 3: Developing Knowledge & Addressing Stigma

- What can I do as a coach to increase comprehensive knowledge of HIV in my young players?

- What can I do to increase knowledge in my community of HIV transmission and prevention?

- What can I do to develop the Life Skills of young players that will help them to avoid HIV?

- What can I and my partners do to assist people living with HIV?
Lesson 8
Conclusion, Reflection, Planning

Exercise 1: Questionnaire

1. What is the difference between HIV and AIDS?
   - A. There is no difference they are the same thing
   - B. HIV and AIDS are two different diseases and are not related
   - C. HIV is the virus that causes AIDS
   - D. HIV is a viral infection and AIDS is a bacterial infection

2. HIV is believed to have evolved from a similar virus found in which animal?
   - A. Monkey
   - B. Chimpanzee
   - C. Lion
   - D. Rat

3. What does it mean if a person’s CD4 cell count has dropped to 350 cells/mm³ or less?
   - A. They have fully recovered from the virus
   - B. They should start ARV treatment
   - C. They have developed AIDS
   - D. They are not vulnerable to opportunistic infections

4. What is the risk of someone contracting HIV during oral sex?
   - A. Higher risk than during vaginal or anal sex
   - B. Same level of risk as during vaginal or anal sex
   - C. No risk at all
   - D. Low risk, but increased if either person has cuts or sores in their mouth

5. Which country has the highest number of people living with HIV?
   - A. India
   - B. South Africa
   - C. Swaziland
   - D. Germany

6. What is the age of consent for consensual heterosexual relations in most countries in Africa?
   - A. 18 years
   - B. 11 years
   - C. 16 years
   - D. 14 years

7. Is there a cure for AIDS?
   - A. Having sex with a virgin will cure AIDS
   - B. There is no cure for AIDS
   - C. There is a cure for AIDS but it is very expensive and only available to rich people
   - D. There is no such thing as AIDS

8. Post-exposure prophylaxis (PEP) are?
   - A. Anti-retroviral drugs which may be administered to prevent HIV infection as the result of an event with high risk of exposure
   - B. Anti-retroviral drugs can be taken before having sex that protect you from HIV
   - C. Anti-retroviral drugs which can be taken when a person’s CD4 cell count drops to 350 cells/mm³
9. Which of the following behaviours does not place young women at risk of contracting HIV?

- Having unprotected sexual relations with an older more mature male who treats her well and gives her gifts
- Having unprotected sex with her boyfriend and with another male friend without telling her boyfriend
- Taking drugs and hanging about in a gang where the men become aggressive and sometimes demand sex
- Practicing abstinence and not having sexual relationships until in a mature and faithful relationship with a faithful partner whose status you know

10. Approximately, how many people are there living with HIV in the World?

- 33 Million
- 55 Million
- 11 Million
- 22 Million

11. Which of the following can transmit HIV?

- A Mosquito Bite
- Someone infected with HIV sneezing in a room
- Using a cup used by a person infected with HIV
- Having unprotected sex with someone infected with HIV

12. Having unprotected sex with multiple partners at the same time?

- Reduces the likelihood of becoming infected with HIV and other STDs
- Increases the likelihood of becoming infected with HIV and other STDs
- Is not risky, if the partners I am having sex with all appear healthy
- Has the same risk as having sex with one partner whose status I know is HIV negative

13. How many times can a male or female condom be used?

- 3 times
- 5 times
- Once
- Male condoms once, but female condoms 5 times

14. If a football player incurs an injury during practice or a match that results in bleeding?

- The player must leave the field immediately to seek medical attention
- Can continue playing to the end of the practice or match before seeking medical attention
- Only needs to leave the field immediately if they are HIV positive

15. If a player on a football team informs the coach that he/she is HIV positive, the coach must?

- Ask that player to leave the team immediately
- Treat the player exactly as before, keeping the information you have been confidential between you and the player
- Inform the other players on the team and ask them if the player should be allowed to remain a member of the team
- Inform the other players on the team and tell them if they are not happy they must leave the team
Exercise 2: Planning to take Action

It is one thing having increased knowledge of HIV and AIDS and knowing how football can make a contribution to HIV prevention and the eradication of the stigma attached to the disease. What is needed is action. In this exercise you are asked to identify what you would like to achieve as an YDF Coach in the month following this short course that will address the issues of HIV prevention and to reduce the stigma and discrimination that surrounds the disease.

Using the following planner, write down your goal, what you would like to achieve. Next identify what challenges you will face in trying to achieve your goal. Consider the challenges and list under solutions how you might overcome these challenges. Finally, be honest with yourself and rate how strong your will is to achieve the goal you have set. Use a scale of 1 to 5 to rate your will, where 1 is weak and 5 is very strong.

<table>
<thead>
<tr>
<th>GOAL</th>
<th>CHALLENGE</th>
<th>SOLUTIONS</th>
<th>WILL</th>
</tr>
</thead>
<tbody>
<tr>
<td>What I would like to achieve in the next month as a YDF coach to make a contribution to the prevention of HIV and AIDS?</td>
<td>What will be the challenges that I will have in achieving my goal?</td>
<td>How I will overcome these challenges?</td>
<td>On a scale of 1 to 5 where 1 is low and 5 is high, how determined am I to take action?</td>
</tr>
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<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2</td>
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<td>3</td>
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<td></td>
<td>4</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>
Lesson 2

Work Sheet 2 - 2 of 3


Lesson 3

Work Sheet 3 - 1 of 4

1. False - HIV is not transmitted through coughing or sneezing.
2. True - HIV can be transmitted through unprotected sex.
3. False - HIV can be transmitted through, vaginal, anal and although low risk, in certain circumstances through oral sex.
4. True - Mothers who are HIV positive can pass the virus through breast feeding to their child.
5. True - Sharing equipment for intravenous use of drugs that are not sterile can lead to transmission of HIV.
6. False - Condoms do not contain HIV.
7. False - You cannot transmit HIV through kissing.
8. True - But the risk is very low, but the presence of mouth sores or cuts may facilitate the virus being passed.
9. False - Although again the risk is very low, but the presence of mouth sores or cuts may facilitate the virus being passed.
10. False - HIV cannot be spread through environmental contact with items such as door handles, eating utensils, toilet seats, etc.

Lesson 8

Work Sheet 7 - 1 of 5 and 2 of 5

Structure of a Training Session

- Conclusion
- Main Part
- Warm Up

- Contents
- Exercises

Time
Phase
Planning / Monitoring Sheet

Date:          Date:          Venue:          Venue:
DD/MM/YYYY     MM/DD/YYYY     YYYY/MM/DD    YYYY/MM/DD
Organiser:    Organiser:    Number of Players:
Number of Players:

Objectives / Focal Points:

1. WARM UP

Time:

Training Method 1

Procedure / Organisation:

Variation:

Training Method 2

Procedure / Organisation:

Variation:
### 2. MAIN PART

**Training Method 1**

<table>
<thead>
<tr>
<th>Procedure / Organisation:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Variation:</td>
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</table>

**Training Method 2**

<table>
<thead>
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<tbody>
<tr>
<td>Variation:</td>
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### 3. CONCLUSION

**Training Method 1**

<table>
<thead>
<tr>
<th>Procedure / Organisation:</th>
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<tbody>
<tr>
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<td></td>
</tr>
</tbody>
</table>
Pitch - Half x 2
With lines and goals
Pitch - Full x 4
Without lines, with goals