1. Define life skill. Explain the life skills that are required in the context of HIV and sexual health education.

Ans: The term 'life skills' refers to a broad range of soft skills which often vary depending on our individual situations. For young learners, life skills might include numeric literacy and understanding how to share with others, while for university students, knowing how to manage different workloads and meet deadlines is essential. Life skills-based education is an effective methodology that uses participatory exercises to teach behaviours to young people that help them deal with the challenges and demands of everyday life. It can include decisionmaking and problem-solving skills, creative and critical thinking, self-awareness, communication and interpersonal relations. It can also teach young people how to cope with their emotions and causes of stress. When adapted specifically for HIV education in schools, a life skills-based approach helps young people to understand and assess the individual, social and environmental factors that raise and lower the risk of HIV transmission. When implemented effectively, it can have a positive effect on behaviours, including delay in sexual debut and reduction in number of sexual partners.

Life skills are:
- Focus on a few specific behavioral goals, (such as delaying initiation of intercourse or using protection), which requires knowledge, attitude and skill objectives.
- Provision of basic, accurate information that is relevant to behavior change, especially the risks of unprotected intercourse and methods of avoiding unprotected intercourse.
- Reinforcement of clear and appropriate values to strengthen individual values and group norms against unprotected sex.
- Modelling and practice in communication and negotiation skills particularly, as well as other related “life skills”.
- Use of Social Learning theories as a foundation for program development.
- Addressing social influences on sexual behaviors, including the important role of media and peers.
- Use of participatory activities (games, role playing, group discussions etc.) to achieve the objectives of personalising information, exploring attitudes and values, and practising skills.
- Extensive training for teachers/implementers to allow them to master the basic information about HIV/AIDS and to practice and become confident with life skills training methods.
- Support for reproductive health and HIV/STD prevention programs by school authorities, decision and policy makers, as well as the wider community.
- Evaluation (e.g. of outcomes, design, implementation, sustainability, school, student and community support) so that programs can be improved and successful practices encouraged.
- Age-appropriateness, targeting students in different age groups and developmental stages with appropriate messages that are relevant to young people. For example one goal of targeting younger students, who are not yet sexually active, might be to delay the initiation of intercourse, whereas for sexually active students the emphasis might be to reduce the number of sexual partners and use condoms.
- Gender sensitive, for both boys and girls.

Or

Explain the different stages in the development of HIV infection.

Ans: Stages in the development of HIV infection are:

- Stage 1: Acute HIV infection
  - Within 2 to 4 weeks after infection with HIV, people may experience a flu-like illness, which may last for a few weeks. This is the body's natural response to infection. When people have acute HIV infection, they have a large amount of virus in their blood and are very contagious. But people with acute infection are often unaware that they're infected because they may not feel sick right away or at all. To know whether someone has acute infection, either a fourth-generation or nucleic acid (NAT) test is necessary. If you think you have been exposed to HIV through sex or drug use and you have flu-like symptoms, seek medical care and ask for a test to diagnose acute infection.