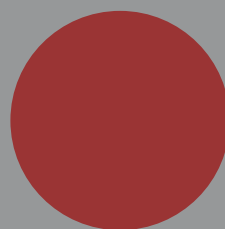
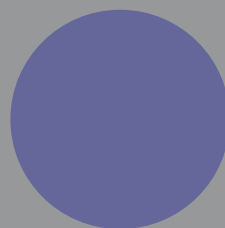
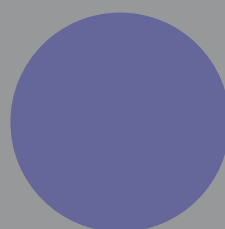




DUNKING AIDS OUT

Learning About **AIDS** Through Basketball Movement Games



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By Davies Banda & Oscar Mwaanga

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N.B Feedback from EduSport peer coaches and participants during the trial of these games was invaluable in making this manual culturally specific and appropriate. We strongly believe that their input has greatly contributed to the effectiveness of this manual.

Complete details leading to the development of this manual are available at the EduSport Foundation.

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Introduction

“Dunking Aids demonstrates how Basketball movement games can be a powerful methodology to help young people, who love and play the game of Basketball, to learn about HIV/AIDS and other related issues through their active participation”

This manual presents an innovative example that practically demonstrates the usefulness of sport, physical activity or physical education (P.E.) activities in the acquisition of important life skills.

Dunking Aids specifically demonstrates how Basketball movement games can be a powerful methodology to help young people, who love and play the game of Basketball, to learn about HIV/AIDS and other related issues through their active participation.

Learning in this way provides a platform that promotes enjoyment, encourages cooperative learning and physically demands the involvement of the participant.



What is the Target Group For This Manual?

“The manual can also be of great use to youth peer coaches, to people working with children, and to sports and physical activity leaders”

This manual is primarily targeted at basketball coaches/instructors and P.E. teachers. The manual can also be of great use to youth peer coaches, to people working with children, and to sports and physical activity leaders.

One does not need extensive experience in Kicking AIDS Out (AIDS Education through Sport) nor does one need access to expensive equipment to use this manual; one however needs the

following in order to use this resource effectively:

One must be capable of leading and communicating effectively with children

One needs some competence in AIDS education

One should also have a basic knowledge of the game of basketball.





How To Use This Manual?

The basketball movement games model examples in this manual can be used in the following ways:

As the main activity for HIV/AIDS Education Programs

As the main activity for P.E. classes

As a warm up or a cool down for P.E. classes

As part of normal basketball and sport teams' activities

It is important for the game leader to actively support the games in order for the games to achieve their intended goal of AIDS Education. This can be done in different ways such as:

Scenario Setting: having a brief introduction before the start of the game to show how the game is connected to the intended learning goal

Giving good clear explanations during the activity

Having a final activity that ties together concepts for the learners. Always remember to only facilitate, step aside, and let the learning be achieved by the participants.

The three points above are revisited and explained more in the next sections.

This manual is not intended to be a complete "recipe" for AIDS education through basketball movement games, but must be seen as a collection of models created by the authors as a means of "triggering your imagination" and provoking you to think for yourself how you can further explore the use of basketball as a methodology and platform to help your players learn about HIV/AIDS.



What Area Does This Manual Cover?

The central issue of this resource is the strategy for adapting Basketball drills or Dunking AIDS Out! movement games and creating new ones for the purpose of helping participants learn and develop both sport and life skills. Particular attention is given to Basketball but this should not limit you but provoke you to explore the use of other sports, using movement games to teach about social issues besides HIV/AIDS.

Meeting the Need?

It has been our experience over the years in dealing with parents, teachers and sports leaders in the area of sport, P.E. and education through sport that parents desire to have their children involved in physical activities that not only benefit their children physically but also provide a platform for development of other important life skills. A strategy that will provide children with an opportunity to learn important life skills while actively participating in enjoyable P.E., sport and physical activities is likely to be very welcome and supported.

The goals and objectives listed below address the needs of administrators, sports leaders, parents, teachers and young people or children.

1. **Develop life skills through sport.**
2. **Promote physical activity and active living.**
3. **Encourage children to play together.**
4. **Promote safety of the available facilities through a thorough safety audit at all sessions.**
5. **Promote FUN-based physical activities which are non competitive.**
6. **Foster social inclusion, embracing the sporting abilities of all participants.**
7. **Promote multiculturalism.**
8. **Provide a platform for peer leadership opportunities leading to peer leadership roles on the playground.**
9. **Increase the productivity of the child and lessen demand on activity leader's time.**
10. **Make children more active through FUN and PARTICIPATION.**



Designing and Presenting

Dunking Aids Out! Movement Games

This manual presents an innovative example that practically demonstrates the usefulness of sport, physical activity or physical education (P.E.) activities in the acquisition of important life skills.

Dunking Aids specifically demonstrates how Basketball movement games can be a powerful methodology to help young people, who love and play the game of Basketball, to learn about HIV/AIDS and other related issues through their active participation.

Learning in this way provides a platform that promotes enjoyment, encourages cooperative learning and physically demands the involvement of the participant.



The aim for this chapter is:

- To provide information that will help you, the user of this manual, to develop movement games for AIDS education.
- To help you understand how we have presented the movements games in this manual in order to make it easy for you to use the resource.



Creating Movement Games For AIDS Education

1. Understanding the Basic Structure of Movement Games

All games are made of the following seven main elements: Purpose; Participants; Movements; Organization; Location; Time and Objects.

The purpose element of the game answers the question: what is the objective of this game? Examples of objectives can be as follows: to enjoy; to develop motor skills; to learn life skills etc.

The participants' element looks at what type of people will participate in the game. Are they young or old? Are they boys or girls? Are they in or out of school? Are they elite or novice players?

The movement element looks at what type, quality and quantity of physical action is to be performed. For example running, jumping, skipping etc. The number of repetitions is also addressed under the movement element.

The organization element deals with how the players will be organized. For example, whether the skills to be acquired are done individually, in pairs or as a group; player positioning at the start of the game: is it in lines or in circles? What pattern shall they follow during the game?

Location element looks at what type of playing field is needed for this game. For example, is it an indoor or outdoor playing space?

Time looks at when the game is best held and also the duration of the game.

The objects element looks at the type of equipment and/or materials required for the game.

Any movement game can be changed or modified for life skills education, including AIDS education. The process of changing games involves three basic stages:

1. Understanding the basic structure of all movement games
2. Modifying the structure for a specific game
3. Creating a suitable motivational game environment



2. Modifying the structure for a specific game

To design or change a game, you simply alter the above game elements to suit your interest or desired game outcome. For example you can say: the purpose will be to teach how AIDS is transmitted; the players will be both girls and boys aged 6 to 12 years old; Movement will be running; The organization will be as in a relay game; Location will be any open space; Time will be 1 hour duration and the objects (equipment) needed for the game are soft balls. By asking yourself “what if I change this or that element” you have started making your own game.

During the game you can improve the game by varying the degree of challenge; this may be necessary because the participants are older or they have mastered the game at hand and can be achieved by altering the elements of the game.

3. Creating a suitable motivational game environment

The final but certainly not the least in creating your own game is trying to ensure that the game is played in a motivating environment filled with positive energy. Regardless of the age or gender of participants, they will benefit more if the game environment is one of fun and enjoyment. Making this possible is the responsibility of the activity leader. In order to create a suitable motivational game environment; we suggest the TARGET procedure:

Task design: Structure the sessions and activities so that everyone can feel a sense of achievement. Make the tasks interesting and fun through variation and personal challenge. Establish realistic short and long term goals.

Authority structure: Involve the players in decision making, for example when finding alternatives to a new game. Provide opportunities to choose and make decisions during the activity or learning process and empower players to take responsibility for their own learning. Empower the players to develop personal control and independence, and be sensitive to any pressures/anxieties players might have.

Rewarding: Recognize, reward and encourage individual effort and achievement. Give rewards that are informative and related to the learning process. For example, instead of money, you can give AIDS ribbons or basketball cards to the winning team in a Dunking AIDS Out movement game.

Grouping: Remember that the way you group the players can have motivating or de-motivating effects. Rarely allow players to pick teams as they usually discriminate the untalented or unpopular players. Obviously, it is demoralizing for players to be discriminated against. Encourage and provide opportunities for group learning and keep all players actively involved. Give the players opportunities to be in mixed groups, for example boys and girls, skilled and less skilled, etc.

cont



Evaluation: The way you evaluate your players is crucial to their learning and enjoyment. Evaluate for improvement and learning in both sports and life skills. When evaluating, do not compare one player to another. Evaluation should be self-referenced. For example, a player can compare his or her performance today to yesterday's performance.

Timing: The pace of instruction and the time allocated for completing tasks can be motivating or demotivating. Adjust task and time requirements for players who are experiencing difficulty in acquiring skills. Try to allow players to determine the optimal progress of their own learning process. It will take some time to master these procedures. But when you do, you will surely appreciate the magic it puts into games.

Whenever possible, it is important to present participants with a local scenario setting that they can relate to so as to make the activity meaningful and to aid the grasping of life skills to be learned. For example, in a movement game, each participant is told that he/she must pass their knowledge about HIV/AIDS to their community symbolized by passing the ball around to everyone before HIV/AIDS infects the whole village. This gives them a purposeful task to achieve as they practice passing skills.

The success of the games is also dependent upon other factors. For example the games' success will depend on your ability and effort to communicate effectively with your players. Good demonstrations of what needs to be done are also an important factor in delivering games. Also important: be enthusiastic at all times; this has positive effects on your players.



How the Movement Games Are Presented in This Manual

Each movement game has sub-headings, illustrations or pictures to make it easy for you to follow the explanation of delivering the game.



Name of game: The names of the games are mere suggestions; you are free to come up with any name(s) you like for the game(s) in this manual. The name of the game is usually related to the purpose of the game.

Life Skill Objective (LSO): The LSO is the AIDS related specific learning you want you players to understand from participating in the game. For basic facts and information about HIV/AIDS needed for all the games, refer to the last chapter of this manual.

Sports Skill Objective (SSO): The SSO is the Sport or physical activity you want your players to practice and develop from participating in the game.

Playing area: This is the playing field where the activity takes place. Effort must be made to ensure that the playing field is safe and suitable for the nature of the activity and for the players.

Number of Players: This takes into consideration the number of players, the size of the playing area and the quantity and size of equipment available.

Type of players: Here we specify the type of players in terms of age, gender and level at school or level of ability in sports or life skills. For example certain topics regarding AIDS prevention may not be suitable for younger children.

Equipment/materials: These are the objects that you need to perform the game. All the movement games presented in this book can be done successfully using cheap, home-made equipment and materials. The equipment must however be safe.

Main Objective: This sub-heading gives a summary of the action that will take place during the game.

cont



Follow-up activity: This may be considered a concluding activity. Using the follow-up activity, the activity leader puts every element in the game into perspective of what lesson should be taken from the game. We want our players to seriously consider the life skill presented in the game. We have suggested that they use several other enjoyable, active and participatory learning activities such as role-plays, songs, dance, puppet shows, video shows, open discussions (dialogue) and question & answer sessions. These cause the players to reflect upon the learning issue presented through the movement game. During the follow-up activities, we want the players to find practical solutions to the real life challenges they face. The activity leaders facilitate the session to encourage self-directed learning, instead of simply giving facts to the players. An important part of the follow-up activity is the child-to-child activity .

Recommendations: This is where we list some suggestions about the suitable setting where the particular game can be used such as part of a P.E. session, a sports practice session or as a workshop activity. Though each game targets a specific group, other groups of different age, gender and ability not specified under the particular game can play most, if not all, games presented. Depending on the time needed to complete the activity, the movement games can be independent sessions or can be integrated into activities such as P.E. classes or specific sport practices.

As you may have already noted, the sub-headings are very much related to the game elements discussed above. The LSO and SSO are related to the purpose of the game, the objects element is related to the equipment/material and so on.

The introduction and conclusion sub-heading have deliberately been left out because the activity leaders are expected to make their own opening and closing remarks related to the purpose of that movement game. Remember to be brief in your remarks. Your introduction will help your players understand the objectives that you wish to achieve in the game. On the other hand, your closing remarks will help put things together. These remarks are especially important for the AIDS education movement games as they make it clear to the players that what happens in the game may conflict with what happens in the real world. This will also give you an opportunity to correct misunderstandings that may occur during a game.

The closing remarks are usually done after the final activity. The movement games approach is fairly new ground as a teaching technique. The weaknesses of movement games in presenting health education should not overshadow its strengths. Through conducting the activities, we are convinced that game leaders and participants will become more familiar with this method. This will be helpful in the future development of this method.





After a series of DAO sessions we recommend that you award or make open recognition of players who demonstrate mastery of life and sport skills.

We recommend that such players be awarded the DAO MVP. In the game of basketball, MVP stands for Most Valuable Player of the particular event. In DAO, MVP stands for Modelling it (the life skill being taught that is connected to HIV/AIDS), Verbalising it and Practicing it.

The players are challenged to model, verbalise and practice what they learn during all DAO activities. This award is therefore not given to the most valuable player(s) but the one(s) who demonstrate mastery of both life and sport skills. To adopt the MVP idea for tournaments, you can have a trophy or t-shirt as prizes for the MVP.



“In the game of basketball you can, Pass, Dribble or Shoot from the triple threat position”



Introductory DAO Stance

The introductory DAO stance is the basketball position that this manual adopts to be used all the time that a new activity has to be introduced or when attempting to draw the attention of the group. In the game of basketball you can, Pass, Dribble or Shoot from the triple threat position. The same three alternatives are made available in the DAO Triple Cool Position. In DAO the triple cool is: Abstinence; Be faithful (stick to one partner); and Condomise.

This chapter introduces the idea of using Basketball relay games for the purpose of AIDS education. Since 1996, we have used relays games to teach young basketball players AIDS related issues and other important life skills. These games have always been a valuable and interesting educational experience for our young basketball players.

Introductory DAO Stance

DAO Triple Cool Position

Description

You have the ball, which represents the problem at hand. There are several options with what one can do, in basketball you can Pass, Dribble or Shoot. In DAO the triple cool is: Abstinence; Be faithful (stick to one partner); and Condomise.

Three Players at a time line up inside the three point line facing the other end, opposite backboard.

They pass the ball to themselves about a metre away with a backspin, catch the ball, reverse pivot and put the ball in a triple-threat position.

Each player finishes by driving to the board for a lay-up or jump shot. Good complete execution earns the player two points.

Follow-up activity

Go over the triple threat position possibilities in a game situation. Ask players to discuss the DAO triple cool position on HIV prevention methods i.e. ABCs of AIDS prevention.

Alternatives For This Game

Use six players: three offensive players to do a triple threat and three to play passive defence.

Include driving to the board for a lay-up after a shot fake

Life skill objective:

To help players challenge the myth that AIDS is not real

Sport skill objective:

To help learn high speed dribbling

Playing area:

A basketball court or any hard surface open space.

Number of players:

10 or more

Type of players:

Boys and Girls of any age

Equipment/Materials:

Suitable balls for the group

“The objective of the game is for the players to perform a dribbling relay as they collect sticks from one end of the playing field and take them to their base where they have to form a sentence”

Diagram
N/A

This is a good game to remind players of the triple cool ABC approach to HIV/AIDS. Use the triple threat position all the time for warm up, cool down or when you are about to introduce something new.





Relay Games

“These games have always been a valuable and interesting educational experience for our young basketball players”



Relay Games

This chapter introduces the idea of using Basketball relay games for the purpose of AIDS education. Since 1996, we have used relays games to teach young basketball players AIDS related issues and other important life skills. These games have always been a valuable and interesting educational experience for our young basketball players.

Relay Games

Sticks Relay

Description

This is a common relay game.

Two teams are picked and they must race from one baseline to the other.

Each team has an equal number of sticks the size and length of pens at the opposite side of the starting point.

They must race and each player must pick one stick at a time and take it back to his or her team.

They must dribble the ball throughout the relay

The team must line up the sticks to make the sentence "AIDS IS REAL".

A total of 27 sticks are needed for this task.

Follow-up activity

Give feed back on the sport skills i.e. high speed dribbling.

Assign 4 players to do a short role-play about the theme "AIDS IS REAL."

As a child-to-child activity, the participants should find out from their community why people think that AIDS is not real.

This game can be used for P.E. lessons and for extra-curricular activities. It can also be used as a warm up for most team sports.

Alternatives For This Game

Ask the players to make sentences about HIV/AIDS prevention methods.

Have two players from each team do the relay at the same time.

Have the players do different types of progressive dribbling through cones lined up along the course of the race.

Life skill objective:

To help players challenge the myth that AIDS is not real

Sport skill objective:

To help learn high speed dribbling

Playing area:

A basketball court or any hard surface open space.

Number of players:

10 or more

Type of players:

Boys and Girls of any age

Equipment/Materials:

Suitable balls for the group

"The objective of the game is for the players to perform a dribbling relay as they collect sticks from one end of the playing field and take them to their base where they have to form a sentence"

Diagram
N/A

Relay Games

ABC Dribble

Description

Divide the participants into three groups, each headed by a chosen team leader. Have them stand at the baseline facing the other baseline.

Three cones are placed close to each other at the opposite baseline; each has a letter placed on it with the printed face legible by all the groups.

Players are to dribble to the other end using the right hand, pick a card, place it in their right hand and dribble back with the left hand.

After the relay, the players must arrange the cards (letters) according to which method they believe is most effective in preventing HIV infection.

Each team works together to give a short message about their card based on prevention:

A - Abstinence **B** - Be faithful **C** - Condomise

Each team must then mention at least two common myths about each method of AIDS prevention they have listed.

- Condoms deny you pleasure
- Your manhood will drop without sex
- No one is perfect
- You cannot eat a banana without peeling it

Points are awarded for finishing the relay and completing the life skill tasks.

Follow-up activity

As a follow up activity we suggest that the game leader assign 3 players to be the starters in a short participatory role-play about the myths related to AIDS prevention methods.

As a child-to-child activity, the participants should find out from their friends and siblings about the myths associated with AIDS prevention methods. The activity leader recaps by giving proven facts to challenge the myths.

Emphasize proper dribbling skills: head up, low bounce below the waist

This game is suitable as an activity for P.E. and extra-curricular programs.

Life skill objective:

To help players learn about the myths associated with AIDS prevention methods

Sport skill objective:

To help participants develop dribbling skills on court

Playing area:

Full basketball court

Number of players:

6 or more

Type of players:

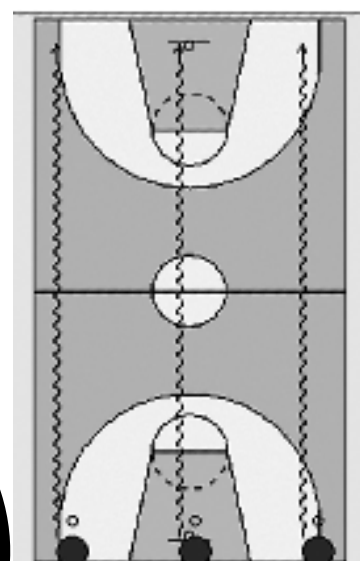
Boys and Girls aged 9 to 12

Equipment/Materials:

Basketballs, cones, cards printed A (Abstinence), B (Be faithful) and C (Condomise) letters on them

“The purpose of this game is for players to quickly dribble the ball down the court, collect a letter and dribble back. They then arrange the letters according to what they think is the most effective way to prevent HIV”

Diagram



Relay Games

Foto-Talk Relay

Description

Divide the participants into three groups, each headed by a chosen team leader. Have them stand at the baseline facing the other baseline.

Three cones are placed close to each other at the opposite baseline; each has an equal number of pictures placed next to it.

Players are to dribble to the other end using the right hand, pick a picture, place it in their right hand and dribble back with the left hand.

It is advisable that players have two runs each in order to collect two pictures each.

A team wins the relay after all its members have had two runs each, all are back at the base and shouting 'Dunk It Out'.

After the relay, each player in their respective teams must tell an imaginary story about HIV/AIDS from the two pictures they collected in the relay.

Follow-up activity

As a follow up activity we suggest that each team must construct one story based on the pictures they have collected. They must tell the story to the rest of the players. They must decide what aspect of issues affecting PLWHA they want their story to focus on.

Emphasize proper dribbling skills: head up, low bounce below the waist
This game is suitable as an activity for P.E. and extra-curricular programs.

Life skill objective:

To help players learn about discrimination and stigmatization of people living with AIDS

Sport skill objective:

To help participants develop dribbling skills on court

Playing area:

Full basketball court

Number of players:

6 or more

Type of players:

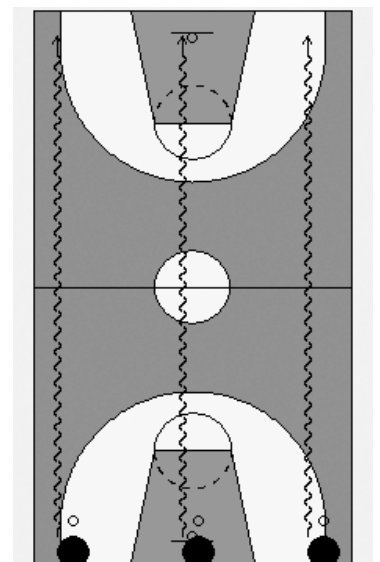
Boys and Girls aged 12 and above

Equipment/Materials:

Basketballs, cones and pictures

"The purpose of this game is for players to quickly dribble the ball down the court, collect a picture and dribble back. They then use the pictures to creatively tell a story relating to HIV/AIDS"

Diagram



Relay Games

Big Brother Drill

Description

Divide the group into two teams each headed by a selected group leader. Have the teams line up at the free throw line.

Teams are to shoot from the designated area which is the free throw line corners for older players and within the key for young players.

The first person shoots, gets his/her own rebound and passes to next person in line.

When a basket is made, the team gains an A representing one method of prevention::

First Shot

Second Shot

Third Shot

A - Knowledge of Abstinence

B - Knowledge of Being Faithful

C - Knowledge of Condom use

Once a team gets to all ABC, they get a chance to evict a player from the opposite team

The evicted player goes to wait on the sideline. The game continues till all members of a team have been evicted.

A team can cancel an eviction if it also collects all three letters immediately after the shot has been made by the first team to collect all three prevention letters .

When a team has been evicted, the members of the winning team can ask members of the evicted team to go and discuss how one can get HIV/AIDS.

Follow-up activity

Members of the evicted team must then explain to the winners how one can contract HIV/AIDS. Winning team members must then show how one can avoid contacting HIV/AIDS through the means being given by the other team.

Alternatives For This Game

Say that every missed shot can be put back as a lay-up if the rebound is caught before the ball hits the ground.

Say that for every missed shot that hits the ground the group forfeits its turn to shoot.

Extend the shooting zone when players master the game.

Life skill objective:

To help participants learn about HIV/AIDS prevention methods

Sport skill objective:

To help participants develop shooting skills

Playing area:

Half court, indoor or outdoor basketball court

Number of players:

4 or more

Type of players:

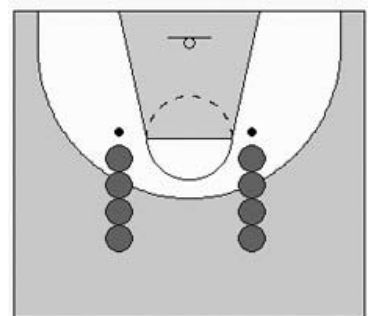
Boys and Girls over 8 years of age

Equipment/Materials:

Basketballs

“The objective is for players to practice shooting from the free throw line (older players) or within the key (young players)”

Diagram



This is a good game to use for teaching shooting under conditions of pressure. It can be used as the main activity to teach shooting in P.E. lessons and has proved very popular when done at a time when the TV reality show Big Brother is running

Relay Games

21 Wins - AIDS Kills

Description

Split the group into two teams and get the teams to form a straight line facing the basket standing at each corner of the free throw line.

The first participant in line shoots, goes after his/her own rebound, regardless of whether the shot is good or not, and then passes to the next participant in line and runs to the back of the line.

The second player then follows suit.

Point system: A team gets two (2) points for every successful basket

When a shot is missed and the rebound hits the ground, a team is awarded an 'A'; an 'I' for the second missed rebound, a 'D' for the third, and an 'S' for the fourth rebound missed.

When a rebound from an unsuccessful shot is caught before it hits the ground, a player can still attempt a lay up for a 1 point award.

When a team has acquired the letters 'AIDS' the other team is the winner. Alternatively, the team that gets to 21 first is the winning team.

Have the teams switch sides so that all players practice shooting from both sides of the court.

For young players, the game scores can be adapted to suit their ability: 3 points for a basket, 2 points for hitting the ring and 1 point for hitting the backboard.

If a participant happens to disturb the other team's shot, such as hitting it, award the offending team a letter as appropriate e.g. if they have an 'A' give them an 'I'.

Follow-up activity

The activity leader can show a video that presents AIDS as a real killer. After the video the activity leaders asks the participants about the video.

Alternatives For This Game

Change the scoring depending on ability of the group. For example, play a 7-point game for young players but maintain the AIDS death knock-out.

Change the number of points that an individual gets for catching a rebound and set the top score to 5 points.

Life skill objective:

To help participants learn about AIDS
as a killer

Sport skill objective:

To help participants practice shooting
and rebounding

Playing area:

Half court

Number of players:

4 or more

Type of players:

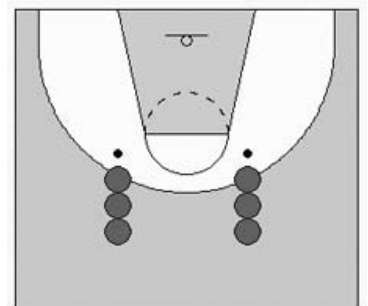
Children above 10 years old

Equipment/Materials:

Basketballs

"The object is for players to practice their shooting. The winning team is the one that gets to 21 first, or when the other team has all the letters 'AIDS' they get knocked out of the game"

Diagram



This game can be altered in many ways to fit the ability of the group. It is very good for pick up games in the neighbourhood.

Relay Games

What Word Is It?

Description

Have the players line up on the baseline ready with a ball facing the instructor in proper basketball stance.

Explain the concept of the game: a card with jumbled up letters will be shown as they dribble forwards, the letters form a word, 'what word is it?' For example, the following words related to HIV transmission can be used:

DISA = AIDS
RUSIV = VIRUS
SKIINGS = KISSING
EXS = SEX
EROSE = SORES

The participants dribble forward, constantly keeping their heads up facing the instructor who is holding up a card. As they dribble, the players must attempt to solve the puzzle and give the intended word that has its letters mixed up.

Point system – 5 points before centreline, and 3 points after centreline. The earlier the better as it means more points to the individual.

When players manage to solve the word puzzle before reaching the base line, they continue bouncing, turn back toward the opposite baseline and dribble to the starting position ready for the next word.

If the word is not solved, players turn at the baseline and get another attempt but with fewer points.

Follow-up activity

The activity leader should ask all players to gather around him/her. All the words used in the game are shown again and written on a board or piece of paper. The words should then be divided equally according to groups and the groups should discuss the words.

Afterward a brief discussion, a presentation is made to the others. For example, the team should explain how the word is related to HIV/AIDS.

Alternatives For This Game

Ask players to use their weak hand and emphasize looking up at all times as they dribble.

Introduce dribbling two basketballs simultaneously or one after the other in a 'one two-one two' rhythm.

Life skill objective:

To help participants learn about the transmission of HIV

Sport skill objective:

To help participants develop dribbling skills and good vision on the court

Playing area:

Full basketball court

Number of players:

3 or more

Type of players:

Boys and girls aged 9 to 12

Equipment/Materials:

Basketballs, cards with jumbled letters

"The objective of this game is for players to continuously look up as they dribble toward the activity leader while attempting to arrange the jumbled letters into a sensible word"

Diagram
N/A

The level of difficulty can be increased as the players manage to solve the word jumbles.

You can use words around themes such as prevention, transmission, facts for the conundrums etc.

Relay Games

Get To Know About It!

Description

Have the players line up on baseline in proper basketball stance, holding a ball and facing the activity leader.

Explain the game: a card with jumbled up letters will be shown to the players. The letters form a word, 'what word is it?' for example, to do with transmission the following can be used

IVH = HIV
IADS = AIDS
ABC = A for ABSTINENCE
B for BE FAITHFUL TO ONE SEX PARTNER
C for CONDOMIZE

Instruct the players to dribble to the other baseline to collect a card with the correct word.

The players must keep the cards they collect as they will be asked to explain more about the words on the cards at the end of the game.

Points are awarded to players who collect the right word and subtracted from those who get the wrong word.

When the game is finished, the players are put in groups. As groups they must explain the words on their cards to the rest of the players.

Emphasis on proper dribbling skills: head up and high dribble when moving up court without defence.

Follow-up activity

As a follow up activity we suggest that the activity leader makes a short presentation on the basics of HIV/AIDS. As child to child activity, the player is assigned to teach their sibling and/or friends in their community about what they have learnt.

Alternatives For This Game

Ask the players to use their weak hand for dribbling to the other baseline.

Life skill objective:

To help players familiarise themselves with AIDS concepts

Sport skill objective:

To help participants develop dribbling skills

Playing area:

Full basketball court

Number of players:

3 or more

Type of players:

Boys and girls aged 9 to 12

Equipment/Materials:

Basketballs, cards with jumbled letters

"The objective of this game is for players to continuously look up as they dribble toward the activity leader while attempting to arrange the jumbled letters into a sensible word"

Diagram

N/A



Problem Mapping



Problem Mapping Games

**“Problem mapping
can help identify
and define the
immediate,
underlying and
basic causes and
consequences of
AIDS”**

This chapter presents an example of how you can use Basketball movement games as part of a problem mapping exercise. Problem mapping can help identify and define the immediate, underlying and basic causes and consequences of AIDS and other health or community problems.

Problem mapping can also help identify the partners involved in solving a given problem. Using sport as part of problem mapping helps participants learn to deepen their social analysis in a fun and physically involving way. Problem mapping is a useful tool because it helps groups to strategize about where to focus their energies in addressing health and/or community problem.

Problem Mapping Games

Pick n Drop

Description

Divide the group into teams of five and select a team leader for each team.

Direct the players to gather at the baseline according to their teams.

Introduce the game with the following statement: 'AIDS has more than one cause'.

Each team is given a pile of cards with different causes of AIDS written on each card: For example poverty, gender inequality, ignorance, HIV virus, injection drug use, being out of school etc.

Each team is required to place these cards at designated points on the court: the basic causes at the free throw line, extended; root causes at the centreline court and the unclassified category at the opposite end baseline.

The teams are given some time to classify the causes of AIDS according to the categories mentioned above; they work as a team to complete this task. Signal the start of the game after the time given to sort out the cards has elapsed.

The activity relay begins by one member from each team bouncing a ball in one hand and holding a card that has to be dropped at the designated point in the other hand. The players must bounce with their right hand on their way up and left on their way back.

The winning team is the team that is first to complete the relay as described above.

Follow-up activity

After the relay, the game leader facilitates a discussion on the different causes of AIDS. During the discussion, the teams must explain why each cause was put in the respective category. The game leader must help the players understand how, for example, poverty or gender inequality can cause AIDS.

Alternatives For This Game

Ask players to use different hands when dribbling, for example, have a competition of using only the weak hand to dribble.

Divide further the sections where the cards will be placed.

Language skill objective:

To help players develop critical thinking whilst working together cooperatively

Sport skill objective:

To help players develop bouncing skills

Playing area:

Full basketball court

Number of players:

15 or more

Type of players:

Boys and girls aged 9 to 12

Equipment/Materials:

Basketballs, cards

"The main object for this game is for the players to pick cards from the baseline and place them on different points of the floor while bouncing the ball"

Diagram

N/A

This game can also be used to explore how to prevent AIDS.

This game is recommended as an icebreaker or as a workshop activity, and is suitable for P.E. and extra curricular activities.

Pick n Drop



Problem Mapping Games

What Do You Know!

Description

Players dribble in a zigzag pattern through cones lined up from one baseline to the other.

Using a whistle, signal when the players must stop. They must stop with the correct footwork.

Players must make a cross over every time they get to a cone.

When the signal is made, those players who are caught up between cones must answer a true or false question about how AIDS is transmitted.

The games assistants administer the quiz.

Players move in a clockwise direction.



Life skill objective:

To help players learn how AIDS is transmitted

Sport skill objective:

To practice dribbling and stopping

Playing area:

A basketball court or any hard surface area

Number of players:

10 or more

Type of players:

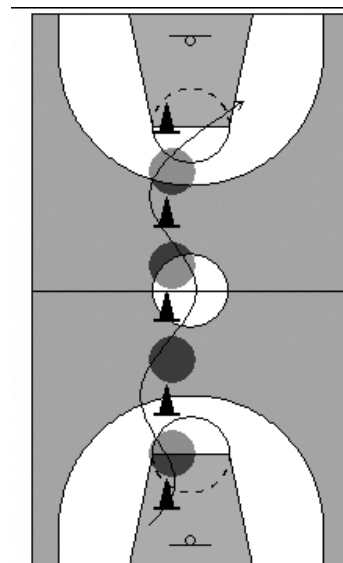
Boys and girls below 12 years old

Equipment/Materials:

Basketballs, cones

"The purpose is for the players to dribble through lined up cones in a zigzag manner"

Diagram



Problem Mapping Games

True or False

Description

Let the whole group of participants be at the centre circle.

Have the players work in pairs.

Start the game by calling out a statement like:

- AIDS is a disease
- Abstinence is better than using condoms
- Sugars daddies are usually HIV negative
- TB is the same as AIDS
- HIV positive people must not be supported

The pair must quickly decide whether the statement is true or false and then slide/ run to either the true or the false designated spots on the court.

The true and false spots can be the two opposite baselines respectively.

After they arrive at either the true or false stations, the players must give reasons to support their answer.

Correct those who are wrong and congratulate those who are right and give additional information.

After the discussion, all players must run back to the centre circle for the next call out.

Follow-up activity

Give feed back on the sport skills i.e. defensive slide.

Assign 4 players to do a short role-play about the importance of knowing about AIDS

As a child-to-child activity, the players should find out at least one example depicting ignorance of AIDS in their community.

Alternatives For This Game

Instruct the players to bounce the ball instead of doing the defensive slide.

Have the players run instead of instead of doing the defensive slide.

Life skill objective:

To help players learn the basics about HIV/AIDS

Sport skill objective:

To practice the defence slide

Playing area:

Large open indoors or outdoors space

Number of players:

20 or more

Type of players:

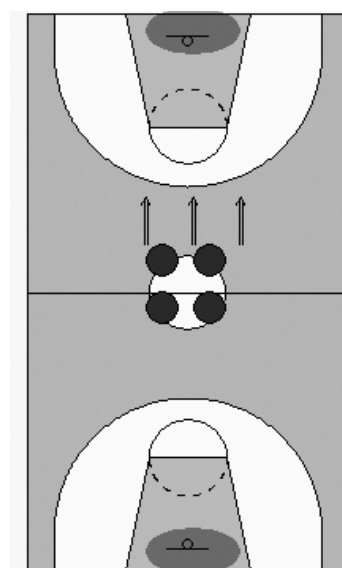
Grade 7 pupils

Equipment/Materials:

None

“The objective of the game is for players to slide to a decided upon station after they answer a true or false question”

Diagram



This game is suitable for all ages.
This game can be a good ice breaker or catalyst for a debate based on the effectiveness of condoms.

Problem Mapping Games

Senf The Word Drill

Description

HIV/AIDS virus roams round the community seeking who it may infect. Have the Players stand in a circle facing each other representing the community; the leader who is the knowledgeable peer coach or community HIV/AIDS expert has the information of prevention, the ball.

The circle = **community**

The person with ball = **empowered individual**

The ball = **empowerment, knowledge, the life saver**

Person outside the circle = **HIV virus**

At a signal, the ball is passed as a handover pass from one player to the next around the circle until the ball returns to the starting point. As the ball is passed round, the player outside runs around the circle opposite the direction of the ball.

The player running must try to return to the starting point before the ball. The community must try to spread the message and empower people before the virus gets to them.

If the ball reaches the starting point before the virus does, the community gets points for prevention.

If the virus gets back first, the player chooses someone to infect. This person then is the virus outside the circle. This continues until everyone has run around, or stops once everyone has had a go without infecting any and the leader commends the community for work well done.

This is a good game to use as an icebreaker or as a warm-up.
It can be used as the main activity for practicing a handover pass.

Follow-up activity

The activity leader should ask participants to work in groups of threes and discuss other means of empowering the public to fight HIV/AIDS. The leader should then facilitate a discussion on the means of empowering communities.

Alternatives For This Game

Have the players stand in a straight line close to each other on the baseline.

Put the stations in the four corners of the full court and have the players dribble before passing. Give the player outside a delayed start if they are getting back too easily.

Life skill objective:

To help participants learn about team work and the basic facts about HIV/AIDS.

Sport skill objective:

To help participants develop sprinting, balance, passing skills.

Playing area:

Indoor or outdoor area

Number of players:

10 or more

Type of players:

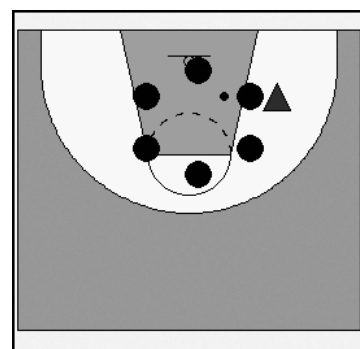
Both boys and girls 8 years and above

Equipment/Materials:

Basketballs

“The objective is for players to pass the ball around in a circle faster than the player running around the outside of the circle”

Diagram



Problem Mapping Games

‘I Am A Playa’

Description

Split the group into four and place each group at each corner of a half court as their base.

Each base has an empty hoop placed on the corner; one hoop is placed at the middle of the half court, equidistance from all bases.

The middle hoop is filled with basketballs. At your signal, have one member from each team split to the middle, pick up a ball and dribble back to his/her respective base.

Upon returning, he/she gives a ‘High 5’ to the next in line who then repeats the same procedure.

When the middle hoop is empty, the players have to go one at a time to grab one basketball at a time from other team bases. The others have to wait for their turn until the team member returns.

Follow-up activity

Activity Leader: “if the basketballs were all infected persons, how many people would be infected now and why do you think they may be HIV positive? What do we learn from this about prevention methods?” The group has to discuss, focusing on sexual behaviour and other prevention methods to avoid getting HIV as ‘they all have been infected now by sharing partners’ (by being playas).

Alternatives For This Game

Ask players to use different hands when dribbling, for example, have a competition of using only the weak hand to dribble.

Compete by stealing two basketballs at once and emphasize going back to the starting position when one loses control of the ball.

Life skill objective:

To help participants learn about basic HIV terms/concepts

Sport skill objective:

To help participants develop sprinting and dribbling skills

Playing area:

Indoor or outdoor area

Number of players:

8 or more

Type of players:

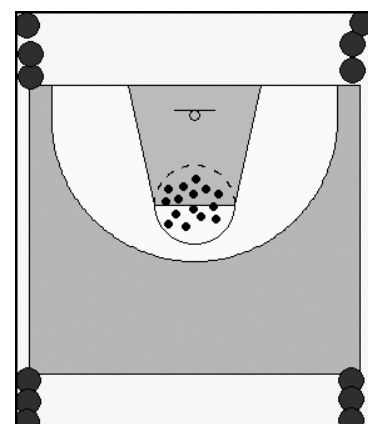
Both boys and girls 9 years and above

Equipment/Materials:

Basketballs , cones, hoops (largest size)

“The purpose of this game is for players to collect basketballs from the central hoop (container) and then to steal from other bases”

Diagram



This game can be used as an ice breaker with older participants since the follow up activity wraps up the real life teaching. Have all the contributions written on the board for further analysis. This is a good activity for extra-curricular sessions.

Problem Mapping Games

Kwishiba!

Description

At the start of the game, stand such that you are clearly visible to every participant; each player must make sure that they have enough space around them.

Demonstrate a ball handling skill which all players must attempt.

The players are given three attempts; those who fail on the third attempt must run to a designated point at the baseline to pick up a card with a question on AIDS.

They must answer it correctly to rejoin the activity; position assistant activity leaders at the baseline to act as the AIDS quiz masters.

The player is allowed to rejoin the drill after the AIDS quiz.

Follow-up activity

Give feedback on the sport skills.

End the session after going through all the quiz questions with the group.

Alternatives For This Game

Ask the players to use two basketballs instead of one.

Ask the players to work in pairs.

Life skill objective:

To help players familiarize themselves with HIV/AIDS and related concepts

Sport skill objective:

To help practice basic ball handling skills

Playing area:

Full basketball court or any hard surface playing space

Number of players:

20 or more

Type of players:

Both boys and girls 9 to 12 years

Equipment/Materials:

Basketballs , cards

“The main objective of the game is for the players to repeat the skill performed by the game leader”

Diagram

N/A

This game can be used as a warm up for novice basketball players. This is suitable for an extra-curricular and P.E activity.



Problem Mapping Games

DAO Stations

Description

Use four cones to outline a square and divide players equally between the four stations

Name the stations/corners using terms related to transmission such as needles, syringes, sex, blood, sores etc.

Have the players practice the names of the stations by passing the ball around and calling out the names as they pass the ball to the particular station. No passes are allowed across the key/middle

After all the stations have been mastered, the drill commences as follows: player 1 passes to player 2, and goes to the end of line 2. Player 2 receives the pass, passes to 3, then goes to the end of line 3. Player 3 passes to player 4, goes to the end of line 4. Player 4 passes to player 1, and then goes to the end of line 1.

Continue the drill by calling out stations when passing to that particular station. Blow a whistle to signal stop, inform the participants that they are not to call out station names anymore but when the whistle is blown during the passing drill, the last person to touch the ball and the person in possession of the ball will be involved in an HIV/AIDS education talk. The talk will be as follows:

Last person to pass: "That station is called the Needles station"

Player with ball "HIV virus can be spread through injection needles"

Follow-up activity

Have the participants go through all the stations and discuss the statements that are true or false about HIV/AIDS and then assign all to discuss these statements with members of their community, e.g. teachers, health counsellor, guardian.

Alternatives For This Game

Set up the stations in the four corners of the full court and have the players dribble before passing.

Use names of partner agencies for the stations and ask questions on what the partners do.

Life skill objective:

To teach about the transmission of HIV/AIDS

Sport skill objective:

To help participants practice passing - chest, bounce, overhead and baseball

Playing area:

Full basketball court

Number of players:

8 or more

Type of players:

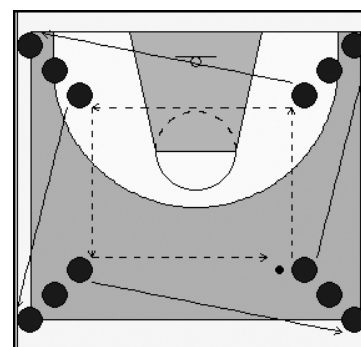
Both boys and girls 8 years and above

Equipment/Materials:

Basketballs, cones

"The main objective of this game is for players to practice all kinds of passes"

Diagram



This is a good game to use for endurance or conditioning of players. It can be used as the main activity for passing drills.

Problem Mapping Games

Guard Yourself!

Description

Have the players start in a confined area. Each player should have a tail clipped to the back of his/her jersey or pushed through his/her shorts at about shoulder blade level. Each player should have a ball.

At the signal, the game commences with each player attempting to grab the tail of any other player. Players must continue to dribble while attempting to take/steal tails from other players.

Player must dribble the ball at all times and maintain control of the ball while attempting to steal a tail or protect own tail.

When a tail is stolen, the player leaves the playing area and stands off to the side of the playing field joining the activity leader as an umpire.

The last player who still has a tail after all have been eliminated is the winner, since he/she has protected him/herself from infection.

Follow-up activity

The activity leader will then facilitate a discussion about how to protect oneself from contracting HIV/AIDS. The participants must explore the ABC prevention message and other known traditional morals.

Alternatives For This Game

Try moving from one baseline to another in a similar way as in "Crossing the River" game where two groups compete against one another.

Life skill objective:

To teach participants about HIV protection

Sport skill objective:

To help participants develop good ball handling under pressure

Playing area:

Full basketball court

Number of players:

10 or more

Type of players:

Both boys and girls 8 years and above

Equipment/Materials:

Basketballs

"The purpose of this game is for players to guard their tails as they attempt to steal the tails of others"

Diagram

N/A

This is a good game to use for teaching dribbling under pressure. It can be played as an extra curricular activity.



Problem Mapping Games

Human Rights!

Description

Choose two players to be the discriminators; and they must stand at the baseline opposite to the rest of the players.

In this game the ball symbolizes the human rights of an individual

Each player has a basketball except for the two discriminators.

At the start signal, all players try to dribble across the court from the starting point to the other baseline.

The discriminators attempt to steal the ball from the players as they dribble across the court.

When a player's ball has been snatched, he/she must leave the game and proceed to an education station where he/she learns about being HIV positive and human rights.

As the player leaves the game, he/she is laughed at and called names that HIV positive people are called in the community.

Leaving the game symbolises being denied human rights when you become HIV positive.

When all players have lost their balls, new discriminators are assigned.

Follow-up activity

Give feedback on the sport skills i.e. bouncing and protecting the ball.

Assign five players to tell short stories (true or false) about the theme in the game. The stories should focus on how PLWHA are denied human rights and/or how they are discriminated.

As the session ends, share some words of wisdom on the day's theme: 'Do to others the way you would want them to do to you.'

As a child to child activity, assign players in pairs to tell their

Alternatives For This Game

Increase the number of discriminators.

Have the discriminators dribble as well.

Life skill objective:

To help players learn that people living with HIV/AIDS (PLWHA) have full human rights regardless of their status

Sport skill objective:

To help players practice bouncing and protecting the ball while attempting to steal or knock out other players' basketballs

Playing area:

Full basketball court or any hard surface playing space

Number of players:

20 or more

Type of players:

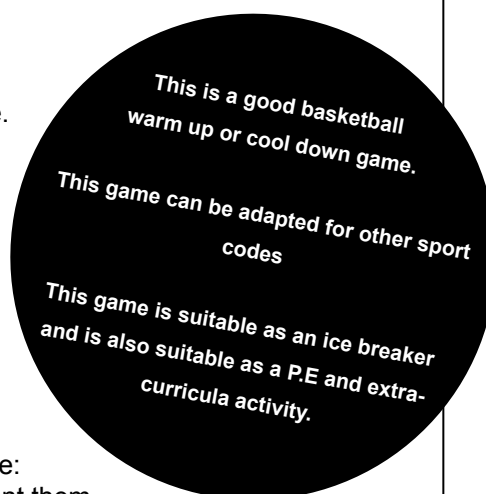
Both boys and girls aged 9 to 12

Equipment/Materials:

Basketballs

"The purpose of the game is for the players to prevent their ball from being snatched or knocked away (basketball steal)"

Diagram
N/A



Human Rights!



Problem Mapping Games

DAO Champs

Description

Divide players into groups of three; have the teams line up outside the baseline and have three players, one from each team position themselves in the lane as shown below while the coach shoots.

The first player in each of the three lines should attempt to catch the rebound, the winner of the rebound then attempts to shoot, if a score is made the player gains an A, leaves the playing area and is replaced by a player from his/her respective team.

If the rebounder misses the shot, the other two players can get the rebound and attempt to score. When a shot is successful, the player gains a letter of empowerment. When a shot is successful the ball is dead and gets back to the coach to reset.

A for the 1st, B for the 2nd and C for the 3rd basket.

First Shot A - Knowledge of Abstinence

Second Shot B - Knowledge of Being Faithful

Third Shot C - Knowledge of Condom use

The team that gets ABC wins, scores are reset.

Use both ends of the court; have players keep their own scores.

Players are allowed to tip the ball back into the basket if it has hit the rim or the backboard.

Follow-up activity

Divide the group into three and name the groups as A, B, and C. Each group should then work on coming up with a poster depicting the prevention method related to their group name. The groups must discuss the poster with the others and answer questions from the floor.

Alternatives For This Game

This can be played as individuals fighting to get all three ABC from three successful shots

Ask the players to clear from the key before shooting after rebounding a live ball from another player.

Introduce 2 on 2 matches with the same rules.

Life skill objective:

To teach HIV prevention methods

Sport skill objective:

To help participants develop rebounding skills and shooting

Playing area:

Full basketball court

Number of players:

10 or more

Type of players:

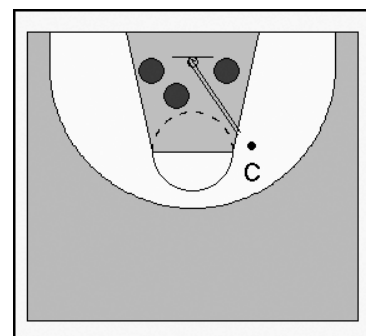
Boys and girls above 12 years old

Equipment/Materials:

Basketballs

“The main purpose is for all three players to fight for a rebound and attempt to score when in possession of the ball”

Diagram



This game can be used as a P.E. activity as well as an extra curricular activity.

Problem Mapping Games

'Your Majesty, The DAO King'

Description

Instruct each player to pick a partner. Use all of the three circles on the court as shown in the diagram, two players in each circle while the other pair waits outside.

Each player in the circle has a ball and should try to knock out of the circle the opponent's ball whilst bouncing. Players must be reminded not to kill their dribble or else they will forfeit the contest.

When a player's ball has been knocked out, another player can be introduced to compete with the king.

Follow-up activity

Ask all individuals who lost a round what they think was the cause of failing to protect themselves.

Possible answers:

'I was under pressure'; 'He just pushed me'; 'I lost control of the ball'; 'He/she was strong than me'; 'I was trying to get him/her when I was caught off guard'.

Then relate these reasons to real life situations and ask the group to give solutions to those situations e.g. 'I lost control and so we had sex'. How can you protect yourself from HIV infection? End the session by looking at prevention methods.

This is a good game for teaching ball handling skills, and is highly recommended for developing your playmakers (Point guard).

Alternatives For This Game

Play loser's final and then at the climax of the game, play the winners final to come up with the DAO king, i.e. the one who manages to protect his/her territory from infection.

Winners can play against the losers within the three point zone.

Life skill objective:

To help participants learn about protecting themselves from HIV infection

Sport skill objective:

To help participants practice bouncing and individual defence

Playing area:

Full basketball court

Number of players:

10 or more

Type of players:

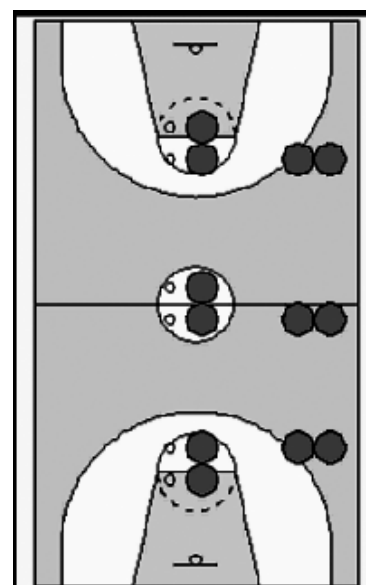
8 years old and above

Equipment/Materials:

Basketballs

"The objective is for players to protect the ball from being knocked out by the opponent"

Diagram



Problem Mapping Games

Around the HIV/AIDS World

Description

Players shoot from 7 spots, exploring the world of HIV/AIDS basic terminology

The terms can be written onto a flipchart as shown in the diagram or the terms can be written on pieces of paper placed next to each cone

When a player makes a shot, the player can move to the next spot only if the player explains clearly the relation of that station to HIV/AIDS

Question: why is the knowledge or understanding of the term..... important in relation to HIV/AIDS? Explain.

Players compete individually against each other, the player that gets to station 7 first is the winner

Follow-up activity

Collect all the cards and divide them equally among pairs or groups of three. Ask the groups to go and discuss, and after the discussion have each group stage a short play depicting three people contracting the HIV virus using the terms assigned to the group.

Alternatives For This Game

Depending on ability of the group, add stations 8 - 12.

The first round (1 - 7) can have terms related to transmission or infection of HIV/AIDS and the second round (8 - 12 or 14) can have terms related to with prevention and some misconceptions of HIV/AIDS infection.

Example of terms to use:

First Round

- 1 - Blood Transfusion
- 2 - Casual Sex
- 3 - Oral Sex
- 4 - Syringes
- 5 - Needles
- 6 - Breast Feeding
- 7 - Kissing

Second Round

- 8 - Partners
- 9 - Condoms
- 10 - Sex
- 11 - Eating/Drinking Utensils
- 12 - Injection Drugs
- 13 - Staying Sober
- 14 - Mother/Infants

Life skill objective:

To help participants learn about basic HIV terms/concepts

Sport skill objective:

To help participants develop shooting skills

Playing area:

Indoor or outdoor area

Number of players:

2 or more

Type of players:

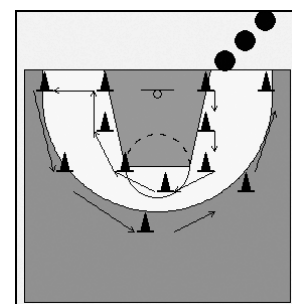
Boys or girls 8 years and above

Equipment/Materials:

Basketballs, cones, whiteboard/flipchart with diagram, adhesive tape, labels

"The main objective is for players to shoot from different stations around the key"

Diagram



This is a suitable game for P.E. and extra curricular activities.

Problem Mapping Games

Double Team Wins

Description

Divide the players into two groups. Have each team line up at opposite baselines facing each other. The offensive team will be the runners and the defensive team will be the chasers.

All the offensive players will have a label on their chest. The labels are items believed to be the causes of the spread of HIV/AIDS:

**POVERTY
ADULTERY
CASUAL SEX
EXCESSIVE DRINKING**

**SUGAR DADDIES
DRUG MISUSE
IGNORANCE etc**

Give each offensive player a label and all players a ball. The game commences as the runners begin to dribble. The defensive players have a chance to decide in order of priority which player to trap first. The list of their priority shows what they think needs to be addressed first in the fight against HIV/AIDS.

Once they have chosen who to trap, they signal to the activity leader that they are ready and then team members trap the play or two of them work on double teaming the target.

Swap sides after all have been kicked out of the game. Let the other team do the same also, thereby forming a list of their priorities. Time how long it takes each team to trap/knock the basketballs out of the designated playing field. The team that traps all the players in the least amount of time wins.

Do an individual variation (no team work or double team) of knocking all out, for example a king of the court contest. See how long it takes and relate the idea of working together to the time framework, partnership achieves more than individuals.

Follow-up activity

Ask each group to write their list on a board in order of priority. Each group must then explain why they chose their top priority issue as the first to tackle over the other ones. Participants must then be asked to find out from their local community HIV/AIDS office, counsellor or health education personnel what the most common cause of infection of HIV/AIDS is locally. Remember to give points for the best reasons for the list of priorities.

Alternatives For This Game

Designate an area such as the three point zone and have the players play within that zone trying to double team the opponents.

Let participants play the game without basketballs instead trap players and tap them out.

Life skill objective:

To help participants learn about Partnerships, or teamwork

Sport skill objective:

To help participants practice ball handling and vision on the court

Playing area:

Full basketball court

Number of players:

10 or more

Type of players:

12 and above

Equipment/Materials:

Basketballs, tags or pieces of paper and a marker, white or blackboard

“The objective is for defensive players to double team or use more than two players to trap an offensive player and cause the play to fall out of the game or simply knock their ball out. The offensive players pick who to trap by levels of importance of issues to tackle”

Diagram

N/A

This is a good game to use when having joint activities, different agencies or NGOs so that participants can have a practical example of partnership work. The game can be use for P.E. or extra curricular lessons

Problem Mapping Games

What Would You Say?

Description

Stand where you are clearly visible. At the start of the game, call out a statement such as: "You are walking down the street; your boyfriend holds your hand and says 'let's go have sex what would you say?'"

Upon hearing this statement the players who are all standing at the baseline must slide to the centre circle and collect the card with the best answer they would give.

They select their cards from a pile of cards placed at several locations on the centre circle.

They keep their cards until the end of the session.

Follow-up activity

Give feedback on the sport skills by giving a demonstration of how to do a correct defensive slide.

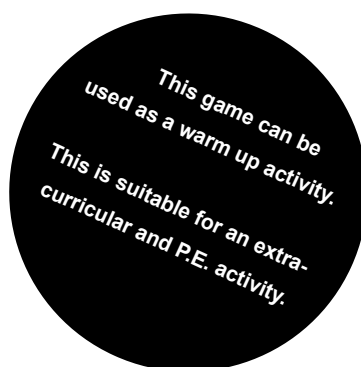
Place the players into groups to discuss the possible answers to the statement given by the game leaders during the game.

Alternatives For This Game

Ask the players to use dribble or run instead of sliding.

Change the game into a relay game between two teams.

Ask the players to work in pairs.



Life skill objective:

To help players learn negotiation and refusal skills

Sport skill objective:

To help practice the defensive slide

Playing area:

Full basketball court

Number of players:

20 or more

Type of players:

Boys and children below 13 years of age

Equipment/Materials:

Information Cards

"The main purpose of the game is for the players to slide to a designated station at the signal of game leader"

Diagram

N/A

Problem Mapping Games

DAO Three on Zero Fast Break

Description

Set the scenario as follows: Your team is behind in scores, you need to quickly score more baskets to remain in the game; you badly need to use fast breaks to catch up. Imagine that globally the world needs to undertake an ABC fast break to fight the pandemic that's affecting us all.

Instruct three players to line up at the baseline as shown in the diagram below.

The ball is at the middle with player 1; player 1 tosses the ball unto the backboard, collects the rebound, shouts 'A', pivots outwards to look for the outlet pass.

Player 2 shouts 'B' calling for the outlet pass at about a 45 degree angle from the backboard. Player 1 passes to player 2 and follows the pass by going behind player 2.

Player 3 runs into the centre of the court and shouts 'C', player 2 passes to player 3 who drives down the middle. Player 2 does the same: follows the pass and goes behind player 3.

Players 1 and 2 fill both outer lanes ready to receive a pass in the key from player 3.

The player that does get the ball finishes by dunking AIDS Out if possible or does a simple lay-up.

Players swap positions on the way back doing the same drill.

Players keep their own group scores, 1 point for three good passes and 1 point for each basket good.

Follow-up activity

Facilitate a discussion on prevention methods and how the three methods used together (symbolized by the combination of passes) can help dunk AIDS Out of their communities.

Alternatives For This Game

Introduce passive defense players who wait to collect a rebound and reacts with their own fast break.

Introduce a three-on-two fast break after the participants have grasped the drill.

Life skill objective:

To teach survival skills and prevention methods

Sport skill objective:

To teach the Three on Zero fast break

Playing area:

Full basketball court

Number of players:

6 or more

Type of players:

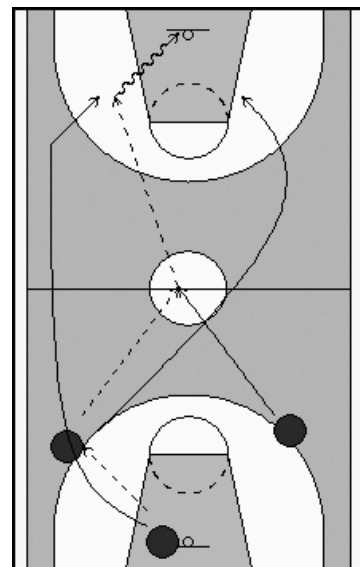
Boys or girls 8 years and above

Equipment/Materials:

Basketballs

"The purpose is to teach players to take three long passes to get to the other end and finish off with a lay up"

Diagram



This game can be used for teaching fast break fundamentals to all levels of players.

Have player 3 stop at the foul line, fake and pass. The receiver then takes a jump shot.

Problem Mapping Games

DAO 5 on 5 Team Defence

Description

The ball will symbolize HIV and players with protection must avoid the spread as this will mean less people infected with HIV due to good defending. The theory in basketball is to stick to your man, if you don't the team suffers.

Emphasis sticking to ones opposition partner and guarding them all the time, try to discourage switching players on defense unless necessary.

Once the scenario has been set, divide the players into equal numbers so that there is a 1 on 1 situation or man to man defence.

Designate a playing area: no offensive team member is to go out of the marked zone. The playing area is preferably a half court for 5 on 5, or the three point inner area for 3 on 3 team defence.

The defensive players need to prevent the passing of the ball from one offensive player to the other.

The drill must be timed, 1 minute or more playing time and strict 5 - 10 seconds to release the ball by an offensive player in possession.

Swap sides and then compare scores afterward.

Follow-up activity

Participants are asked to discuss the ABC method of protecting oneself from infection and are to find out from their community what prevention methods are promoted and why.

Alternatives For This Game

Divide the court into 4 regions, and then play a DAO tournament with four defensive teams and four offensive teams.

Have the offensive players rotate from region to region while trying to see the best defending team who can be crowned the DAO champions.

This is a good game to use as a main activity to teach man to man defence.

This can be used for teaching about sticking to one's partner rather than switching partners as it usually causes problems.

The game can be used to teach and explain the importance of having a joint effort in HIV prevention.

Life skill objective:

To teach about working as a team or partnership

Sport skill objective:

To help participants practice team defence

Playing area:

Full basketball court

Number of players:

10 or more

Type of players:

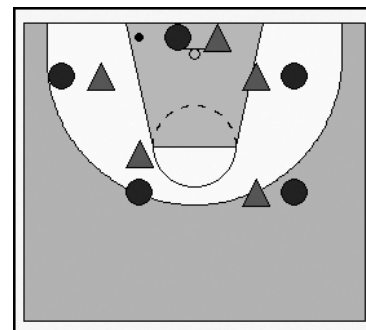
Boys or girls 10 years and above

Equipment/Materials:

Basketballs, stopwatch

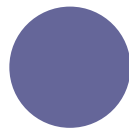
"The objective is for defensive players to prevent the offensive players passing the ball round, the fewer the number of passes the better"

Diagram





Goal Setting



Goal Setting Games

**“By breaking
down the
general goal into
more specific
goals or action
statements, we
can make what
we are trying
to achieve less
intimidating”**

The idea behind goal-setting is that when faced with non-specific, broad goals for something we are trying to achieve, we are likely to feel overwhelmed, hopeless, de-motivated and anxious. By breaking down the general goal into more specific goals or action statements, we can make what we are trying to achieve less intimidating and more achievable.

A youth girl basketball player living in a poor neighbourhood may wish to prevent herself from getting infected with the HIV virus and/or getting pregnant. She may also want to improve her game so that she can get a career from playing basketball in order to support her family. However, these are broad aims that are hard to achieve because just as there are many aspects involved in helping one stay free from being infected with HIV, there are many aspects involved in improving one's game.

Using the idea of goal setting, the player must identify areas of her life and game that are important to work on in order to remain HIV free and to improve her game respectively.

Goal Setting Games

My Goal is to...

Description

This is a relay game. Divide the group into 2 teams; each team picks a team leader.

The players gather at the baseline according to their teams. They must work together to write two broad goals i.e. one Life skills goal and one sport skills goal. An example of a life skills goal is: To avoid getting infected by HIV/AIDS; and an example of a sport skills goal is: To win the DAO Basketball league..

They must then concisely write down two specific objectives (action statements) each based on how each team member intends to achieve the broad goals set as a team. An example of an action statement is: To increase my free throw percentage from 35% to 49 % by the end of 3 months. An example of a life skill action statement: To avoid unprotected sex by using condoms.

Give the teams specific time to write down the goals and action statement and signal when the time is up.

When both the teams are ready, the activity leader must collect the cards, place the cards on the opposite baseline. The cards are swap, in that the all the specific action statements for team A are placed directly opposite team B and those for team B members are directly opposite team A.

Place team A's life goal card to the left of team B's line at the baseline where they are lined up and place the sport goal on their right. Do the same for team B's goals. The teams must then line up for the bouncing relay, where they must collect the cards, one card at a time, and place them on designated spots on the goal.. specific action statements must be placed

The players must then do a relay taking two turns per player collecting cards and bring them back to the designated spots on the opposite baseline. The players must bounce with their right hand on their way up and left on their way back. The first team to complete the relay is declared the winner.

Follow-up activity

Give feedback on the sports skill practiced i.e. high speed bouncing. Each palyer later picks two cards from each category (life and sports specific action statements).

After each palyer has picked cards, the activity leader should facilitate a discussion by stating the life skills goal for team A and then team B members must specifically ask team A members whose specific action statement cards are being read out to explain how they intend to put into practice such actions.

Do the same for the other team (team B), this time team A reads out the specific action statements.

Life skill objective:

To help players set goals and actions of achieving the goals

Sport skill objective:

To help players develop high speed bouncing skills

Playing area:

Full basketball court

Number of players:

15 or more

Type of players:

Boys or girls 12 years and above

Equipment/Materials:

Basketballs, cards, pens

"The main objective for this game is for the players to collect cards from the baseline and place them on different points on floor while bouncing the ball"

Diagram
N/A

This game can also be used to help participants set goals in other areas of life.

The team can also use this game to set team goals at the start of the playing season.

This game can be used as a workshop activity or ice breaker.

Goal Setting Games

Together We Can

Description

The idea is to keep the participants on their feet, running continuously. The ball symbolizes DAO activities that occur in different regions and the players are network partners who must keep the work going, working together globally.

Signal the beginning of the drill by blowing a whistle.

Players are to jump, tip the ball against the backboard and then dash down the court to join the other end of the queue.

Balls must not drop. The drill may be timed, for example 1 minute, 1 1/2 minutes or 2 minutes without dropping any basketball on both ends.

Make sure that the players run continuously to develop endurance, if necessary extend variation by making players touch the sideline before joining the other end.

Have the players position themselves according to height if they are having difficulty tipping the ball continuously.

Follow-up activity

Depending on the performance of participants, centre your discussion on partnership, working together for a common goal. If they performed well, ask them why they think they did well, help them relate their responses to a community fighting HIV/AIDS. If their performance was not good, ask them why and how their responses relate to qualities needed working as a team or forming a partnership. Explain how their own organization relies on both local and international partners to fight HIV/AIDS

Alternatives For This Game

If there are too many players, place cones at certain points such that players have to run and touch the cones before rejoining the lines. This will increase the amount of running involved in the game.

Put quiz stations on the centre line as bridges to be crossed before the participants can proceed to the other end. Pick participants randomly to allow the flow of the game to continue.

This is a good game to use for conditioning players. It can also be used as a P.E. activity

Life skill objective:

To introduce the concept of partnerships and goal setting

Sport skill objective:

To help participants develop endurance

Playing area:

Full basketball court

Number of players:

10 or more

Type of players:

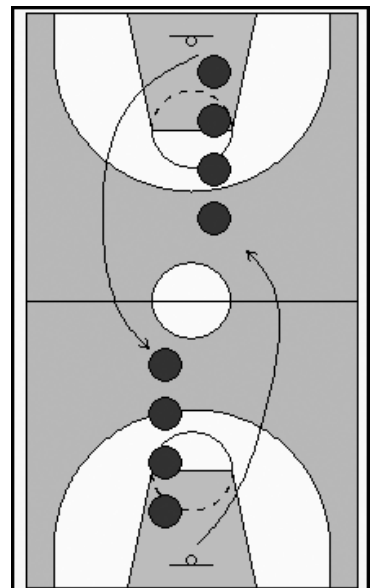
Boys or girls 14 years and above

Equipment/Materials:

Basketballs

“The objective is to set a goal for players to keep the ball in the air, tip the backboard and not allow the ball to touch the floor”

Diagram





Open Dunking Aids

Open Dunking Aids Out School!

“The basic idea of Open DAO schools is that several children are allowed to complete life and basketball sports skills tasks at specific stations”

The open DAO School is based on the idea of circuit training. The basic idea of Open DAO schools is that several children are allowed to complete life and basketball sports skills tasks at specific stations. Whereas normal circuit training is about sports skills training, open DAO schools integrates basketball and life skills. The players must rotate from one station to the next station on a signal from the activity leader. We always recommend a clockwise rotation. The number of stations depends on the available equipment, space and the number of players.

It is important to ensure that there is an equal number of players in each station and that all players have an opportunity to try out the tasks in all the stations before the end of the session. Also remember that the Open DAO schools are the Basketball version of the Open KAO schools. This means that open schools can be DAO or KAO adapted for any sports discipline. Open DAO schools have the following advantages:

More young people can participate at once

They can be done with limited or improvised equipment

You can practice DAO skills on any open space

Open Dunking Aids Out! School

Open DAO School

Description

There are a total of 8 stations: 4 sports skills stations and four life skill stations. Have the players position themselves equally at all the stations.

Stand in the middle of the court.

Cones are used to demarcate the stations. The stations are located as follows:

- **Sports Skills Station (SSS) 1 is the area under the hoop and around the key**
- **SSS 2 is located around the right side of the centre circle.**
- **SSS 3 is the opposite of SSS 1 on the other side of the court**
- **SSS 4 is the opposite of SSS 2 on the left side of the centre circle.**

The Life skills stations (LSS) are always located between SSS and for this activity the LSSs are located around the four corners of the court. The LSOs are located as follows:

- **LLS 1 is located next to SSS1 on the right side.**
- **LLS 2 is located in the corners next to SSS 2.**
- **LLS 3 is located in the corner next to SSS 3.**
- **LLS 4 is located in the corners next to SSS 4.**

The following are the tasks for the Sport Skills Stations:

- **In Sport Skills Stations 1 and 3, the players will work in pairs shooting and rebound the ball.**
- **In Sport Skills Stations 2 and 4, the players will perform different passing drills**

The following are the task for the Life Skills Stations (LLS):

- **In LSS 1 and 2 players perform sentence relays; were they collect words from a pile to construct correct sentences about how HIV is transmitted and how it is not transmitted. The words are written on cards.**
- **In LSS 3 and 4 players perform sentence relays; were they collect words and letters to construct correct sentences about how HIV can be prevented.**

When you signal the beginning of the game, the players can start to work at the task at their respective station. At your signal, they then proceed to the next station and the game proceeds in this way.

During the activity, go around and give feedback to the players.

Life skill objective:

To learn about AIDS

Sport skill objective:

To practice passing, rebounding and shooting

Playing area:

Full basketball court

Number of players:

40 or more

Type of players:

Boys or girls 12 years and above

Equipment/Materials:

Basketballs, cones, cards

“The objective of this activity is for players to carry out the different tasks they are assigned in each life and sports skill stations within a given time period”

Diagram

N/A

Open DAO Schools can be adopted for any sports discipline. It is best to finish the activity when all players have gone at least twice in each station. If the stations are performed more than twice, they may become boring and the skills will lose their importance.



“Tag games are potentially good to use as AIDS education movement games because they do not require much equipment”



Tag Games

Tag games are common games played by children in communities around the world. They are usually played during P.E. lessons, on children's playgrounds and as a warm up activity in many sport disciplines.

Tag games are potentially good to use as AIDS education movement games because they do not require much equipment, they are physically involving and most important of all they are great fun. This chapter has models of how basketball tag games can be used for AIDS education.

Tag Games

Sugar Daddy Game

Description

One player is picked to be the rich man or child abuser (also called the Sugar Daddy). All players excluding the tagger (sugar daddy) have a basketball. The Sugar Daddy, who stands in the middle of the playing field, calls the rest of the players to play with him or her.

At this time, all the players are outside the playing area (also called out of bounds), which is the city. The sugar daddy tries to convince them to approach him. The dialogue may be as follows:

Sugar Daddy: Kids, kids, let's go out and have fun together
Kids: We are afraid
Sugar Daddy: What are you afraid of?
Kids: We are afraid of being abused
Sugar Daddy: I will buy sausages and chips for you

The players are allowed time to plan and agree on how they will answer and challenge the Sugar Daddy when he tries to persuade them.

It is important that the players use the expressions and words that are used in real life situations. After the third attempt, the Sugar Daddy succeeds in his efforts and the kids are convinced it is safe to play with him.

The players enter the city or basketball court. They must bounce across the playing area to the other safe side without being tagged by the Sugar Daddy.

When tagged, a player joins hands with the Sugar Daddy and together they chase after the other players while maintaining the individual defensive basketball stance.

As players are tagged, they continue to link with the Sugar Daddy by forming a chain. When there are more than three Sugar Daddies, the chain must split up. After the last player is tagged, the game begins again with a different person starting as the Sugar Daddy. At the end of the game, facilitate a discussion on refusal skills.

Follow-up activity

Assign five players to do a short role-play around the theme in the game. The role-play may be about how adults (especially men) try to sexually abuse children. Tips on what you should do when an adult tries to sexually abuse or harass you should conclude the role-play. Then assign players in pairs to tell their friends in the community about what they should do when an adult tries to sexually abuse them.

Life skill objective:

To help participants learn about refusal skills

Sport skill objective:

To help participants practice bouncing and individual defence

Playing area:

Full basketball court

Number of players:

10 or more

Type of players:

Children under 12 years old

Equipment/Materials:

Basketballs

"The objective is for players to try and make it across to the safe side of the city (across the playing area) without being tagged. They must bounce the ball as they try to get across"

Diagram

N/A

This game is also suitable for P.E. lessons and as an extra-curricular game.
Different versions of this game can be played by children in any open space.

Sugar Daddy Game



Tag Games

DAO Ring Virus

Description

Have 5 or more players on each team stand equidistance from each other forming a circle. One player has the ball.

A volunteer from each team must go over to the opposite and stand in the middle of the circle and attempts to intercept or deflect the opposition team's passes. The players outside may use any type of pass to avoid the middle player touching the ball or deflecting it.

Passes cannot be made to the person standing directly to the right or left of the person in possession of the ball.

Each passing session should be timed; there should be a time limit give to both teams to pass the ball round without interception. If both teams manage to prevent the virus infecting the ball, they all gain an empowerment e.g. A for Abstinence; B for Be Faithful (sticking to one partner); or C for Condomise.

If the DAO virus (i.e. the person in the middle) infects the ball by touching it or intercepting the pass, his or her team gets an A for Abstinence. The players in the middle then get back to their respective teams.

Another set of volunteers then become the DAO virus in the opposite circle.

The team that gets all ABCs first gains 2 points. The first team to get to 10 points are the winners.

Follow-up activity

The activity leader leads a discussion focusing on germs attacking the immune system of a person, how the HIV virus gains access to the immune system and its effects. Participants must then discuss how to guard one's immune system from an HIV virus attack.

Alternatives For This Game

Increase the playing time.

Increase the number of defensive players in the middle of the circle to two.

This game is suitable for P.E. and extra curricular activities.
This is a good game for ending sessions on a high note (interesting ending).

Life skill objective:

To help participants learn about the HIV virus

Sport skill objective:

To help participants develop passing skills

Playing area:

Open space, basketball court

Number of players:

5 or more

Type of players:

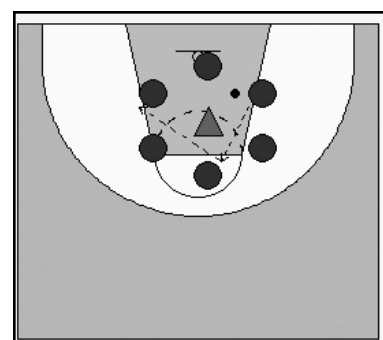
Boys and girls 8 years and above

Equipment/Materials:

Basketballs, cones

“The objective of this game is for players passing the ball to avoid interception of their passes by the player in the middle of the circle”

Diagram



Tag Games

BB Rounders

Description

Pick two teams. Team B is the guessing team and team A is the one to hand the small ball behind their back.

The two teams stand in two lines about 4m apart, facing each other.

Members of team A pass a small ball behind their backs. They move it from one hand to the next so as to confuse members of team B as to who has the ball at any given moment; a selected member of team B must guess who has the small ball on team A.

Before a member of team B makes a guess, the members of the team must dribble the ball 10 times between their legs (Figure 8 drill).

All members of team A must keep their hands behind their backs during the time of the guessing and the dribbling.

Team A only shows their hands after the guess has been made.

When the player on the guessing team guesses right, his or her team gets a point and the other team shouts, "lucky, lucky".

When a player makes a wrong guess, he or she is out of the game; when all members of the guessing team have had a go, the teams exchange roles.

Follow-up activity

Give players feed back on the sport skill i.e. how the figure of 8 is done. For the life skill, ask 4 players to prepare a short role-play about the theme "you cannot tell that a person is HIV positive by looking at that person". The role-play must confirm that only an antibody test can confirm whether one is HIV infected or not. The participants must

Alternatives For This Game

Instruct all players on the guessing team to dribble the ball to the end of the playing field and pick out a card with the statement "You cannot use your eyes to tell who is HIV positive" before they exchange roles.

Have all players who have made the guess run backwards to a chosen corner of the playing field to do a quiz on voluntary counseling session.

Life skill objective:

To learn about AIDS prevention

Sport skill objective:

To practice running and dodging skills

Playing area:

Open space in or outdoors

Number of players:

10 or more

Type of players:

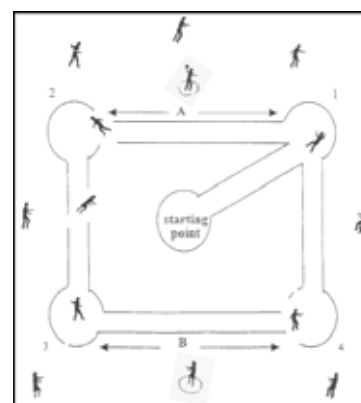
Upper Primary

Equipment/Materials:

Small football

"The purpose is for the players to run from one designated spot to the next and to answer true or false questions about AIDS prevention methods"

Diagram



This game can be used in many ways. It can be used for a P.E. lesson, as an extra-curricular activity, and as a cool down after team sport practice.

Tag Games

Survival

Description

Divide players into two teams; one team is named the taggers and the other team is the one to be tagged. The players can only be tagged when they are outside the Immune Free Zone. There are three immune zones: Immune Zone A (circle around the free throw line); Immune Zone B (centre circle) and Immune Zone C (circle around the free throw line). Players shoot when they are in the free zones A and C. They must only attempt once and then progress toward the next immune free zone. The players to be tagged start at the baseline; they must bounce the ball as they progress.

Four players from the tagging team are assigned to do the tagging; taggers are situated on the sideline with two in each half court as shown in the diagram below. The taggers throw small softballs at the other team, trying to hit them as they progress through the stations. The players have one ball each to tag with and they must stand on one side of the field. They must throw the small balls between themselves. Demarcate the court as follows: The team to be tagged must progress from one end of the basketball court using the middle area of the free throw line extended.

The team to be tagged must bounce their basketballs with their strong hand on the way up and their weak hand on the way down. They must use the free hand to deflect the small balls. The rest of the tagging team players are situated around the court in order to collect the loose small balls. A player is tagged when a soft ball hits another part of the body apart from the free hand being used for deflecting the soft balls. Players playing survivor start off one at a time, one player per interval with ten bean- or sandbags in one arm at the opposite end of the area.

The taggers are only allowed to take one step as they try to tag. Every time the ball touches the survivor's body, except for the deflecting free hand, the survivor must drop one of the body cells (bags). The balls can only hit the survivor when he or she is moving between two cones (between stations) and not when he or she is at the station (around the cones).

Once the survivor finishes or goes through the course to the end, the remaining body cells are counted and a new survivor is chosen. Repeat the game until all have had a chance to be a survivor. When everyone is tagged, the teams exchange roles. After completing equal turns, the teams must compare points. The team with the greatest number of points is the winner.

Follow-up activity

Ask the players to explain what happens to our immunity when we have AIDS. As a suggested child-to-child activity, have players find out from their teachers, friends, siblings and parents what they should do to avoid being attacked by germs, especially the HIV virus.

Life skill objective:

To learn about AIDS prevention

Sport skill objective:

To practice running and dodging skills

Playing area:

Open space in or outdoors

Number of players:

10 or more

Type of players:

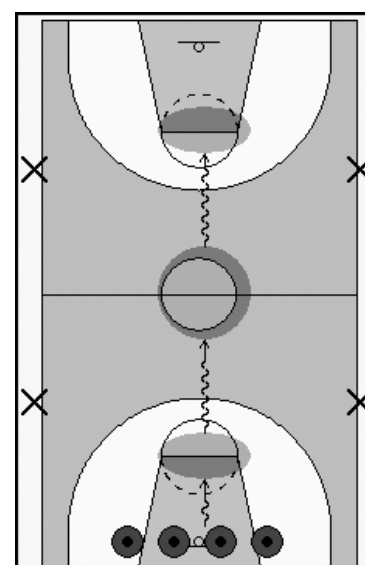
Upper Primary

Equipment/Materials:

Small football

“The purpose is for the players to run from one designated spot to the next and to answer true or false questions about AIDS prevention methods”

Diagram



This game
can be used as a warm-up
or cool down activity.
The game is also suitable both
as a P.E. activity and an extra
curricular activity.

Tag Games

Don't Trust Your Eyes

Description

Pick two teams. Team B is the guessing team and team A is the one to hand the small ball behind their back.

The two teams stand in two lines about 4m apart, facing each other.

Members of team A pass a small ball behind their backs. They move it from one hand to the next so as to confuse members of team B as to who has the ball at any given moment; a selected member of team B must guess who has the small ball on team A.

Before a member of team B makes a guess, the members of the team must dribble the ball 10 times between their legs (Figure 8 drill).

All members of team A must keep their hands behind their backs during the time of the guessing and the dribbling.

Team A only shows their hands after the guess has been made.

When the player on the guessing team guesses right, his or her team gets a point and the other team shouts, "lucky, lucky".

When a player makes a wrong guess, he or she is out of the game; when all members of the guessing team have had a go, the teams exchange roles.

Follow-up activity

Give players feed back on the sport skill i.e. how the figure of 8 is done. For the life skill, ask 4 players to prepare a short role-play about the theme "you cannot tell that a person is HIV positive by looking at that person". The role-play must confirm that only an antibody test can confirm whether one is HIV infected or not. The participants must tell their siblings about the day's lesson.

Alternatives For This Game

Instruct all players on the guessing team to dribble the ball to the end of the playing field and pick out a card with the statement "You cannot use your eyes to tell who is HIV positive" before they exchange roles.

Have all players who have made the guess run backwards to a chosen corner of the playing field to do a quiz on voluntary counseling session.

Life skill objective:

To help understand that you cannot know that someone is HIV positive simply by looking at a person

Sport skill objective:

To practice the basketball figure 8 drill

Playing area:

A basketball court or any open space with a hard surface

Number of players:

10 or more

Type of players:

Boys and girls aged 10 and over

Equipment/Materials:

Small ball, basketballs

"The objective of the game is for a chosen member on team B to guess who on team A has the small ball after every 10 dribbles in a figure 8 pattern"

Diagram

N/A

This game can be used in many ways. It can be used for a P.E. lesson, as an extra-curricular activity, and as a cool down after team sport practice.

Don't Trust Your Eyes



Tag Games

ABC Countdown

Description

Two teams are picked: team A and B.

The team in possession of the ball must pass the ball between its members, in a confined area, to make points.

As the ball is passed among team members, the opposing team is permitted to intercept or deflect the ball in order to win possession.

One pass is equal to 1 point but a team needs to pass the ball 10 times without interceptions to make a set (A or B or C); they lose possession to the other team after every set.

Intentional body contact is not permitted.

The team winning the 1st set gets A (abstinence); the second set is awarded B (Be faithful to one partner) and the last set is awarded C (condom).

Follow-up activity

Give feedback on the sports skill i.e. the main point in passing and positioning to receive the ball.

As follow-up on the life skills, divide the players into three groups. Each group will discuss one of the safe sex practices and come up with arguments for and against each one of the ABCs.

The groups then dialogue together on how to effectively use each method in order to prevent infection. The players must tell their younger siblings what practical action one can take in order to use the best (most applicable) method for safer sex.

Alternatives For This Game

Allow the ball to bounce before it is caught.

Use the letters HIV or STD instead of ABC.

Use the word Condom instead of ABC.

Life skill objective:

To help introduce a lesson on ABC (abstinence, be faithful to one sexual partner and condom)

Sport skill objective:

To help players develop passing and opening up to receive a pass

Playing area:

A medium sized space, indoors or outdoors

Number of players:

6 or more

Type of players:

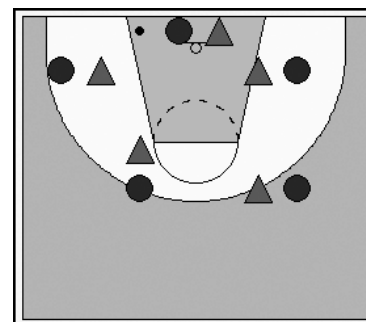
Boys and girls aged 10 and over

Equipment/Materials:

Small ball, basketballs

“The objective of this game is for team members to pass the ball 10 times between team members without the other team intercepting the passes”

Diagram

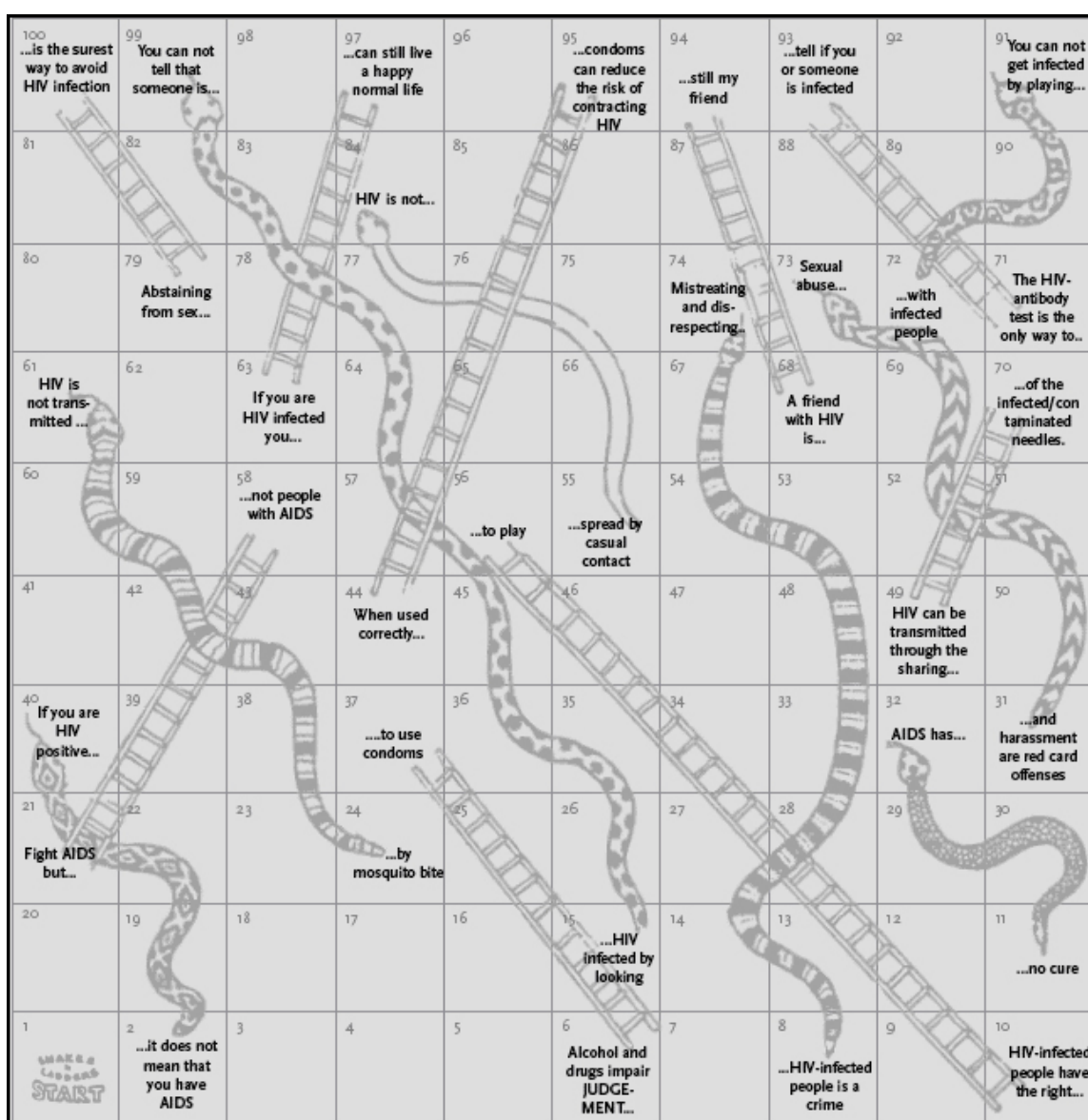


This game can be used as warm up activity for the team sports.

The game can also be used for P.E. and extra-curricular activities.

Snakes & Ladders Game

“The snakes and ladders games are popular games played by all age groups. In this chapter we show how basketball and AIDS related life skills are integrated into the common snakes and ladders game. The snakes and ladders chart can be drawn covering a wide range of AIDS information”



Snakes & Ladders Game

Dunking AIDS Out! Snakes & Ladders

Description

Have the players position their markers at the starting square in the snakes and ladders chart.

One player is picked to start the game; he must shoot until he misses.

He then moves the marker according to the number of shots.

If a marker stops on the head of the SNAKE, the snake swallows it; the player then moves the marker down to the tail of the snake.

As the player move the marker, he or she reads the message that starts at the head and ends at the tail of the snake.

If a marker lands on a square that is at the bottom of the LADDER, the player moves it to the top of the ladder.

As a player moves the marker, he or she reads the message that starts at the bottom and ends at the top of the ladder.

As in a normal snakes and ladders game, one must resume at the next new position i.e. top of the ladder or bottom of the snake.

The first player to reach square 100 wins the game, but the player must have shot the exact number needed to land on the final square. It is better that the snakes and ladders chart is prepared before hand on a large hard paper.

Follow-up activity

Give feedback on the sport skill i.e. how to take free throws.

Answer questions that the players have about AIDS.

As a child-to-child activity, ask the players to try modifying the game at home with their siblings and friends.

Alternatives For This Game

Provide a smaller ball for shooting. Have the players shoot the ball with their weaker hand. Blindfold the players when they take their shot.

Use the game to teach about HIV/AIDS related diseases only. Use the game to teach about dangerous drugs. Use the game to teach about gender inequality.

Ask the players to do a figure of 8 while blindfolded instead of taking free throw shoots.

Life skill objective:

To help players learn about AIDS awareness in general

Sport skill objective:

To teach players how to take free throws

Playing area:

Open area indoor or outdoor

Number of players:

Two to four

Type of players:

Boys and girls aged above 12 years

Equipment/Materials:

Basketballs, small stones to act as markers

“The main objective is for the players to shoot the ball, move their markers and read out statements in boxes”

Diagram

N/A

Players can use any other parts of the body to juggle and control the ball. This game is suitable as a P.E. and extra curricular activity. This game can also be good as a family game, for example played between a father and his son.

What you need to know about HIV/AIDS

By the end of this chapter you should be able to understand the basic facts about HIV and AIDS.

Basic knowledge about HIV/AIDS is important for activity leaders if they are going to be able to do AIDS work in sports effectively. It is a prerequisite that all activity leaders have a sound knowledge of the basic facts about HIV/AIDS. HIV/AIDS training is offered by many local AIDS organizations in your area. Most of this training is given as part of the peer educators training program. Training to make DAO activity leaders “AIDS competent” is one reason why DAO programs introduced in schools and clubs should be linked to the local AIDS organizations.

This chapter is not meant to replace the training for coaches to become “AIDS competent”. It is meant to supplement what you already know and to provide instant points of reference and facts in case you should need them for your DAO sessions. This chapter will also help the DAO leaders make decisions based on facts rather than myths with regard to the integration of HIV/AIDS issues in their programs.

What is HIV?

HIV stands for Human Immunodeficiency Virus. This is a virus that kills the body's cells called “CD4 cells”. The CD4 cell is an important cell in the blood stream that helps to protect the body. The cell functions to fight diseases and strengthens the immunity of the body against numerous types of infections and cancers.

A diagnosis of AIDS is made based on a low CD4 cell count. HIV can be passed from person to person if someone with the HIV infection has sex with or shares drug injection needles with another person. It can also be passed from mother to her baby when she is pregnant, when delivering her baby, or if she breastfeeds her baby.

What is AIDS?

AIDS stands for Acquired Immunodeficiency Syndrome. People with HIV are susceptible to several infections. The person with AIDS will show different symptoms of infections depending on how much his or her CD4 count has decreased. Tuberculosis (T/B), Herpes zoster, particular types of cancers, pneumonia and meningitis are all common conditions among people with AIDS. T/B is the most common AIDS-defining condition in sub-Saharan Africa.

TB is a disease caused by a germ called *Mycobacterium* (my-ko-bak-TEER-i-um) tuberculosis. TB is an airborne bacterium. TB usually affects the lungs, but TB germs can also infect any part of the body. TB may be latent or active TB. “Latent” means that the germs are in the person's body but are not causing illness. If you have latent TB you will not have symptoms and cannot spread TB to other people. However, if HIV has made your immune system too weak to stop the TB germs from growing, they can multiply and cause active TB (also called TB disease).

As coaches or activity leaders we should encourage our players or the participants to get tested for TB as soon as possible after learning that they have HIV. Advise them to go to the health centre or hospital for a skin test for TB. Since people infected with HIV are likely to be unaware of this fact, it would be a good idea to encourage people to take the TB test.

HIV is transmitted in the following ways:

1. Unprotected sexual intercourse. HIV can enter the body during sex through the anus, vagina, penis or mouth, as well as through cuts, sores and abrasions on the skin. Unprotected anal and vaginal sex are the riskiest sexual activities.

Anal intercourse is more dangerous than vaginal, because unlike the vagina, which produces lubricating secretions that lubricate the vaginal wall, the anus does not produce secretions. There are a small, but growing, number of reported cases of HIV transmission through oral sex. However, the risk of oral transmission is clearly lower than that of anal or vaginal sex. The virus has to enter the bloodstream of a person in order to infect that person.

2. From an infected mother to her infant. HIV can be transmitted from mother to child during pregnancy, birth or through breastfeeding. Treatment during pregnancy can reduce infections from mothers to infants.

3. Injection drug use HIV can also be transmitted through the sharing of infected/contaminated intravenous needles among drug users. After use, small amounts of blood can remain in the used needles and syringes. This remaining blood is enough to infect the next user if the needle or syringe is not disinfected or sterilized to kill the HIV virus.

HIV is rarely transmitted in the following ways:

1. Blood transfusion and organ transplants. The risk of acquiring HIV from a blood transfusion today is much lower than before. The risk of acquiring HIV from an organ transplant is equally lower. Today, blood and organ banks screen out the potential donors at risk for HIV infection in advance. They then do extensive testing on specimens of blood, blood products and organs for HIV and other blood-borne germs.

2. The health care setting. There is a very small, but real risk for health care workers getting HIV from patients as a result of needle stick accidents and other substantial blood exposures. The risk of patients getting infected from health care workers is also very small.

3. Kissing. Unless the persons have sores in their mouths, kissing is regarded as a safe activity, although it may be a theoretical risk for infection.

HIV is NOT transmitted by:

1. Casual contact. HIV is not spread by casual contact. It dies quickly outside the body and is easily killed by soap and by common disinfectants such as bleach.

There is no risk of infection from:

- Donating blood
- Mosquito bites
- Toilet seats
- Shaking hands
- Hugging
- Sharing eating utensils
- Food or objects handled by people with HIV/AIDS
- Spending time in the same house, business, or public place with a person with HIV/AIDS
- Doing sports activities together (unless people are heavily wounded and bleeding, such as through boxing)

For the activity leaders this means that it is OK for participants to play sports, shake hands, hug or kiss cheeks or hands, sleep in the same room, share drinking and eating utensils and towels with HIV infected people or players.

The best way to know whether you are infected: HIV voluntary counselling and testing

You cannot tell whether or not a person is infected by simply looking at him or her. (A boy or girl on your sports team, at school or anyone (including yourself) in the community might be carrying HIV but look completely healthy.) During this time of apparent health, he or she can infect someone else. In fact, most people who carry HIV do not know about it. Neither does their sex partner.

The HIV-antibody test is the only way one can tell if you are infected. When HIV enters the blood stream it begins to attack the immune system. The immune system then produces antibodies to fight off the infection. Although these antibodies are ineffective in destroying the HIV virus, their presence is used to confirm the HIV infection. Testing can tell you whether or not you have developed antibodies to HIV. Most people will develop detectable antibodies within three months after infection. The period when the test cannot detect antibodies is called the window period. You may test HIV-negative if you take the test during the window period. For this reason, it is recommended to take the test 6 months after the

You should receive counselling before and after taking the HIV-antibody test. This counselling will help you understand the results of your test, learn how to protect your health, and (if you are infected) provide you with knowledge of how to prevent passing the virus on to others. Regardless of your HIV status, counselling should be a central part of the testing process. (Counselling is covered in depth in later sections.)

What happens if I become infected with HIV?

Being infected with HIV does not mean you have AIDS. It does mean however, that you will carry the virus in your body for the rest of your life. It also means you can infect other people – for instance if you have unprotected sex. You can infect others even if you feel fine and have no symptoms of illness. Perhaps more importantly, you can infect others without even knowing that you are carrying the HIV virus.

Being infected with HIV is not only a health matter. It raises financial issues and social issues as well. One issue is whether you can afford treatment. One's ability to pay for health care can affect people's access to monitoring and treatment. People must discuss these issues with a qualified counsellor. A doctor should be able to advise you on the approved drugs that act to slow down the effects of the HIV virus, as well as treat your overall health as an HIV positive person in general. In addition to medication, you can strengthen your health through a good diet and exercise.

Some people may avoid persons who they believe are infected with HIV. Some people who are infected have been targets of discrimination in employment, housing, school and even in sports and recreation. Some have been deeply hurt by the reactions of friends and family members. However, in most areas you find organizations, and especially non-governmental organizations (NGOs), which protect HIV infected individuals against all forms of discrimination, especially discrimination in the workplace. Some NGOs even help to ensure that one receives the services and resources available to the public. Support groups can offer the help needed to cope with fears or discrimination. A counsellor may help connect the infected person to the relevant organizations and groups.

Being able to participate in physical activity such as sports and recreation will boost your immunity

and will also benefit you psychologically. Sports and recreation and going to work also give the infected people an opportunity to socialize and continue with their new lives.

PREVENTION – how to avoid infection

There is no vaccine to protect people from getting infected with HIV. There is no cure for AIDS either. This means that the only certain way to avoid AIDS is to prevent getting infected with HIV in the first place. Since HIV is transmitted in different ways, there are also different ways to prevent this transmission from happening. The following are ways to avoid being infected by HIV:

1. Prevention of HIV transmitted through sexual intercourse

An important way to protect oneself from HIV infection through sexual transmission is through practising safer sex. This is summarised as ABC, which stands for Abstinence, Being faithful to a faithful partner and Condom. The safest thing to do is to abstain from sexual intercourse all together. You are also safe if you are in a stable relationship where both you and your partner are free of HIV and neither of you have other sex partners. Safer sex also includes using condoms (both female and male condoms can be used, but you do not have to use them at the same time). Condoms must however be used correctly, and you must use one every time you have sex. Sex without penetration is another way to have safer sex. You can have a great deal of stimulation and pleasure through caressing, hugging, kissing, and massaging different parts of the body.

Related to matters of HIV transmission through sexual intercourse in sport, is the sexual abuse of girls in particular by their male coaches. Your AIDS policy should clearly show how a coach guilty of such behaviour should be dealt with. Delegates at the Nairobi Kicking AIDS Out conference (2001) recommended that organizations within the KAO network should **GIVE A RED CARD TO SEXUAL HARASSMENT, ABUSE AND EXPLOITATION.**

Being infected does not mean the end of an active and productive life. You can continue to participate in sports, go to school and work normally.

Many people find it hard to abstain and we are not as faithful as we like to believe. Thus, using condoms is the most realistic and practical safer sex option we are left with. Although condoms are not 100% effective in preventing HIV transmission, when used correctly and consistently, condoms are highly effective and reliable in reducing the risk of transmitting and acquiring HIV as well as other sexually transmitted diseases (STDS) such as syphilis, gonorrhoea, and Chlamydia, and stopping unintended pregnancies. When condoms do fail, it is most often because of improper and/or inconsistent use.

Following these basic rules will further reduce the small chance of condom failure.

1. Use latex (rubber) or polyurethane condoms.
2. Open and handle condoms carefully. Never use a condom in a damaged package or one that is past its expiration date. Do not store condoms in hot or sunny places (like in a wallet or by the window).
3. Use plenty of water-based lubricants to reduce the friction that can cause the breakage. Never use oil-based lubricants like

Vaseline, hand cream or mineral oil, which can rapidly break down latex and allow the virus to pass through. Most contraceptive jellies are water-based lubricants.

4. Put the condom on after erection but before insertion. Leave some room at the tip for the discharged semen (some condoms have a reservoir tip for this). It is important to pinch the tip as you roll it down onto the penis to be sure that there are no air bubbles that could pop under pressure. If the penis is uncircumcised, pull back the foreskin before unrolling the condom all the way down to the base of the penis.

5. After intercourse, withdraw the penis while it is still erect, holding the base of the condom to prevent it from slipping off or spilling semen. Remove the condom and wash the penis with soap and water.

6. Use a condom only once and dispose of it in the garbage; do not flush condoms down the toilet. Never reuse a condom.

“Although condoms are not 100% effective in preventing HIV transmission, when used correctly and consistently, condoms are highly effective and reliable in reducing the risk of transmitting and acquiring HIV”

It is the job of the DAO activity leader to encourage participants to use a condom EVERY TIME they have sex when transmission or acquisition of HIV is possible. It helps if the leaders practice what they preach.

Other measures:

• Know your partners

This may sound obvious, but many people engage in sexual activity without first establishing a committed relationship that allows for trust and open communication. You should be able to discuss past sexual histories and any previous STD (sexually transmitted diseases) exposures or IV (intravenous) drug use, as well as current health status. Both partners must be empowered to either start or terminate sexual activity.

• Stay sober

The use of alcohol or drugs may impair judgment, communication abilities, and the coordination required to properly use barrier devices (condoms) or lubricants. Alcohol and drugs can impair the ability to make the right choices about sex. With this knowledge in mind, sports leaders should ensure that the NO DRINKING AND NO DRUGS RULE for players below 18 years is followed.

• Be considerate of your partner

People with AIDS or HIV infection should not donate blood, plasma, body organs, or sperm. From a legal, ethical and moral standpoint, they should inform any prospective sexual partners of their HIV status. They should not exchange bodily fluids during sexual activity and must use whatever possible preventive measures (such as latex condoms) that will afford the partner the most protection.

Prevention of HIV from an infected mother to her infant

Women with HIV and their partners should be counselled about the risk to their infant before becoming pregnant. The mother must have access to medical care, which will help prevent the baby from becoming infected. The HIV positive mother should not breastfeed her infant if other options are safe. Alternatively, the mother should breastfeed EXCLUSIVELY (not feeding the baby anything else, not even water) until she completely changes to other kinds of food. Modern treatment can reduce infection from mothers to infants.

How can HIV transmission from injection drug use be prevented?

The surest way to completely avoid HIV infection from drug use is to abstain. The next surest way is to use a brand new syringe every time you inject yourself. If brand new syringes and needles are not available, properly bleaching used syringes and needles may be an effective method of reducing HIV transmission. Drugs – injected or not – can also increase a person’s risk for HIV by causing impaired judgment, reduced decision-making ability, and/ or by enhancing sexual drive. Based on this fact you may, as a DAO leader or activity leader, want to introduce a RED CARD against drugs in clubs.

Voluntary HIV counselling and testing

According to the UNAIDS policy, voluntary testing accompanied by counselling plays a vital role in HIV/AIDS prevention and support. VCT (Voluntary HIV Counselling and Testing) should therefore be encouraged. The potential benefits of testing and counselling for the individual include:

- Knowing whether or not you have HIV infection would alert you to your need to seek medical care to prevent or delay life-threatening illnesses. Your test result (positive or negative) would also help your doctor determine the cause and best treatment for whatever illnesses you may have now or in the future. For example if you are HIV positive, tuberculosis and syphilis are treated differently than if you are HIV negative.
- Motivation to initiate or maintain safer sexual and drug-related behaviour.
- Emotional support; better ability to cope with HIV-related anxiety.
- Awareness of safer options for reproduction and infant feeding.

“many people engage in sexual activity without first establishing a committed relationship that allows for trust and open communication”

This section covers important information to help you understand the benefits of voluntary counselling and testing. The section addresses facts, issues, and questions and answers that all relate to HIV testing and counselling. You may find that some information from previous sections has been repeated in this section. This has been done so that you can understand the information as it relates to VCT.

New choices: HIV and AIDS medical care offers vital benefits Early medical attention can slow the growth of the human immunodeficiency virus (HIV), the virus that causes acquired immunodeficiency syndrome (AIDS). The slower the virus spreads, the longer an individual's body will be able to fight off the illnesses and life-threatening conditions that often accompany AIDS.

Some Q and A (questions and answers) about VCT

1. Should I seek HIV counselling and testing?

If you have engaged in behaviour that can transmit HIV, it is very important that you consider counselling and testing. The following check list will help you assess your degree of risk.

2. If I think I have been exposed to HIV, how soon can I get tested?

To find out when you should be tested discuss it with your testing site staff. As discussed earlier, the tests commonly used to detect HIV infection actually look for antibodies produced by your

body to fight off the HIV viruses. Most people will develop detectable antibodies within three months after infection, the average being 20 days. In rare cases, it can take up to 6 months. It is extremely uncommon that the body requires more than 6 months to develop detectable antibodies. For this reason it is recommended that one gets tested 6 months after the last possible exposure to the virus. (It is possible to be exposed during unprotected vaginal, anal, or oral sex, as well as when sharing needles.) It is important, during the 6 months between exposure and the test, to protect yourself and others from further possible exposures to HIV.

3. Who should get HIV tested

Counselling and early diagnosis of HIV infection are recommended for:

- Persons attending sexually transmitted disease clinics and drug treatment clinics;
- Persons who have had more than one sexual partner and had unprotected sex;
- Persons with partners who have had other sexual partners over the past months;
- Persons who inject drugs;
- Partners of injection drug users (either spouses, sex partners, or needle-sharing partners);
- Women of childbearing age;
- TB patients;
- Patients who have received transfusions of blood or blood components.
- In addition, couples considering marriage should together seek information about AIDS, as well as voluntary counselling and testing.

HIV counselling and testing regulations and Routines

It is important that you understand your rights with regard to testing and counselling. You can ask your testing counsellor how the testing centre will protect the results of your test. It is important that you understand the confidentiality policies of your testing centres. Most counselling and testing centres follow one of two policies:

Confidential Testing

The confidential testing site records your name with the test results. Your record will be kept secret from everybody except medical personnel or in some countries, the ministry of health. You should ask who will have access to the results and how they will be stored. If you have your HIV antibody test done confidentially, you can sign a release form to have your test result sent to your doctor.

Anonymous testing (not available in many countries). No one asks your name. You are the only one who can tell anyone else your result.

Deciding where to go for Counselling and Testing

Depending upon where you live, you may have several counselling and testing options. These options include HIV testing centres, community health centres, hospitals, TB clinics, private doctors, family planning clinics and sexually transmitted disease (STD) clinics. In making your choice, you want to consider the following factors:

- If you have been to a particular place for health care before, you may feel more comfortable receiving counselling and testing from staff you know rather than from strangers.
- Should you be infected with HIV, it is beneficial if the centre can provide immune system monitoring and medical care, as this may speed up the initiation of your medical treatment.
- Some counselling and testing centres offer special features. For instance, if you use drugs, you can receive counselling, testing and help to deal with your addiction problems at a drug treatment facility.

It is possible that some centres, such as doctor's offices or clinics, will use the information about your test result as part of your medical record. Thus, the information gathered from the tests may be seen by other health workers or employees. If any healthcare provider suggests testing you for HIV antibodies, discuss the potential benefits before deciding whether or not to take the test.

The Process of Counselling and Testing Counselling

You should receive informative reading material before you enter a group or private session with a counsellor or doctor. He or she might ask why you want to be tested. Your counsellor should ask about your behaviour and the behaviour of your sex partner(s). This will help you and your counsellor determine if testing is appropriate for you. If testing is the appropriate thing to do, your counsellor or doctor should:

- Describe the test and how it is done.
- Explain AIDS and the ways HIV infection is spread.
- Discuss ways to prevent the spread of HIV.
- Explain routines of confidentiality of test results.
- Discuss the meaning of possible test results.
- Ask what impact you think the result will have on you.
- Address the question about whom you might tell about your result.
- Discuss the importance of telling your sex and/or drug-using partner(s) if the result indicates HIV infection.

If these questions are not covered, or if you have any other questions, ask them. You should prepare the questions that have been on your mind in advance by writing them down. Also ask your doctor or counsellor how they will inform you about the result. If your test is negative, the post-test counsellor will talk to you about how to avoid behaviour that will put you at risk of infection.

Informed Consent

You have the right to be fully informed about any medical procedure, to refuse it, or to agree to it. You should ask to read a statement saying that you have been informed about the HIV-antibody testing procedure, that you understand it, and that you have given your consent to having it done.

The Blood Test

A small amount of blood will be drawn from your arm, taken to a lab, and tested. Sometimes you only need to give a prick of blood from your finger. The time it takes to get test results varies from one area to the next. It can take anywhere from a few days to a few weeks. Some rapid tests give the results in only fifteen minutes.

The Waiting Period

The waiting period of days and weeks can produce anxiety and tension. Some people decide they do not want to know their test results, and never return to receive it. It is very important that you finish the process and retrieve the test results in spite of your anxiety. Living with such anxiety can actually be worse than adjusting to the truth.

It is also important that until you return for your results and post-test counselling, you act as though you are infected and could transmit the virus. In other words, do not have unprotected sex or do not have sex at all, and do not share needles. When your results arrive, you may be asked to return to the counselling and testing centre to receive the information in person. Everyone tested should receive counselling, whether the results are positive or negative.

Counselling after the test

Your counsellor should tell you your results and, regardless of whether they are positive or negative, the counsellor should inform you on how to protect your health and the health of others. He or she will review methods used to prevent the spread of HIV.

The Meaning of Your Test Result

Negative Result

A negative result means that no HIV antibodies were found in your blood. Your condition is called seronegative. This usually means you are not infected.

A negative test result does not mean you are immune to the HIV virus. Even if you test negative you must take steps to protect your health and the health of your sex and/or drug-using partner(s). Do not engage in behaviour that can transmit HIV. This includes having unprotected sexual intercourse with an infected person or sharing needles or syringes with an infected person. Your post-test counsellor will discuss this behaviour with you.

Indeterminate Result

Once in a while, test results are unclear. The lab cannot tell whether they are positive or negative, even if the test has been performed correctly. If this happens to you, it is important that you discuss this with your counsellor or doctor, and, if appropriate, be tested again.

Positive Result

A positive result means antibodies to HIV were found in your blood. This means you have been infected with HIV. Your condition is called HIV positive or seropositive. You will most likely

develop AIDS, but no one can know when you will get sick. Within 10 years after infection, about half of untreated people develop AIDS. However, prompt medical care may delay the onset of AIDS and prevent other life-threatening conditions.

“If you test positive for HIV, medical treatment and a healthy lifestyle can help you stay well. There are now many drugs that treat HIV infection and AIDS-related illnesses”

4. What if I test positive for HIV?

If you test positive for HIV, medical treatment and a healthy lifestyle can help you stay well. There are now many drugs that treat HIV infection and AIDS-related illnesses.

You can immediately take a number of prompt steps to protect your health:

- See a doctor even if you do not feel sick. Try to find a doctor who has experience in treating HIV.
- Have a TB (tuberculosis) test done. You may be infected with TB and not know it. Undetected TB can cause serious illness, but it can be successfully treated if caught early.
- Smoking cigarettes, drinking too much alcohol, or using illegal drugs (such as cocaine) can weaken your immune system. Cessation programs are available that can help you reduce or stop using these substances.
- Have a screening test for sexually transmitted diseases (STDs). Undetected STDs can cause serious health problems. It is also important to practice safe sex behaviour (ABC) so you can avoid getting STDs.
- You should practice safer sex measures to protect your partner, but also to protect yourself from being re-infected, and several HIV infections are a risk for a more rapid progression of the disease.

You should tell anyone with whom you have had unprotected sex (vaginal, anal, or oral) or shared needles that you are infected with HIV. It is especially important that you tell current and recent partners. Health professionals can tell your sex and/or drug-using partner(s) for you or help you tell them yourself. All your present and past partners should be referred for counselling and testing. You have an important role to play in helping stop the spread of HIV infection. Telling people about your test result may be a very sensitive matter. When you tell your partners, do not make accusations. Be prepared for partners to become upset or hostile. Urge them to be counselled and tested as soon as possible.

5. If I test negative, does that mean that my partner is HIV negative?

No. Your HIV test result reveals only your HIV status. Your negative test result does not tell you whether your partner has HIV. HIV is not transmitted every time a person is exposed to the virus. Therefore, your taking an HIV test should not be seen as a method to find out if your partner is infected. Testing should never take the place of protecting yourself from HIV infection. If your behaviour is putting you at risk for exposure to HIV, it is important to reduce these risks.

6. My partner tested positive. That means I'm infected, right?

Your partner's test does not always tell you your status. The only way to know whether or not you are infected is to have your blood tested for HIV infection.

7. Even though I tested negative, why do I have symptoms?

See a doctor about your symptoms. They are most likely caused by something other than HIV infection. Early symptoms of HIV infection can be similar to symptoms of many diseases that occur in people who are not infected with HIV. If you test negative and still think you might be infected, consider re-testing. If you test negative again, and you have not engaged in behaviour that can transmit HIV in the past 6 months, you should regard yourself as not infected with HIV.

8. How can I find a doctor who will treat me?

Contact your local health centre and AIDS organizations. They should be able to refer you to a doctor who is experienced with HIV and AIDS related conditions.



Glossary

AIDS:	Acquired immune deficiency syndrome In this book, child-to-child is an idea based on the use of children who participate in DAO activities to reach out to their siblings at home and friends in their communities.
Child-to-child:	In this book, An activity leader is the one who guides the players during DAO
Activity Leader:	He or she ensures that the activities are enjoyable and that learning takes place. Also referred to as a 'facilitator'.
Grid:	A designated area within which players must stay to ensure safety and better activity organization.
Health Education:	An educational process related to activities that increase the ability of people to make informed decisions affecting their personal, family and community well-being.
HIV:	Human Immunodeficiency Virus
DAO:	In this manual the letters stand for "Dunking AIDS Out"
KAO:	In this book the letters KAO stand for "Kicking AIDS Out".
LSO:	In this book, the letters LSO stand for Life Skills Objectives.
Life Skills:	Life skills are abilities that help one to adopt positive behaviours that will enable an individual to deal effectively with the demands and challenges of everyday life.
Movement Games:	In this book, movement games are games that involve considerable movement and where movement is either a primary ingredient or is incorporated solely as a motivator.
NGO:	Stands for Non-Governmental Organisation.
Players:	In this book, the term player refers to children and young people who are being encouraged and guided by coaches, teachers or activity leaders during DAO activities.
SSO:	In this book, the letters SSO stand for Sports Skills Objectives.
STD:	Stands for sexually transmitted disease.



Sources of Important Information

Education through Sport Foundation - www.edusport.org.zm

Federation for International Basketball - www.fiba.com

English basketball Association – www.englandbasketball.co.uk

Kicking AIDS Out Network - www.kickingaidsout.net

UNAIDS - www.unaids.org

UNICEF - www.unicef.org

About the Creators

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Davies Banda is a full time researcher in the sports division at Sheffield Hallam University working on a project that is currently evaluating Positive Futures a national sports intervention program that has 108 projects across the UK. His research interests include HIV/AIDS Education through Sport, project monitoring and evaluation, social inclusion using sport, Sports Development, and enabling youth involvement in youth programs evaluation. He is a qualified basketball coach and course instructor. He designed courses for basketball coaches/trainers in Botswana and is a former national coach of the U19 basketball team in Botswana where he worked as an expatriate for four years. He is currently also an international consultant for EduSport Foundation, Zambia. He holds a Master's degree in Sport Management and Leisure from Loughborough University, level II coaching qualification issued by the English Basketball Association and an advanced level basketball coaching certificate issued by the International Olympic Committee.

Oscar Mwaanga

Oscar Mwaanga is the President and founder for the EduSport Foundation, the biggest sports charity and NGO in Zambia. Oscar has vast experience in community development through sport; he has pioneered and developed many projects including Kicking AIDS Out, Go Sisters! POWERSport etc. He is a holder of Master's degree in Sport and Exercise Science from the Norwegian University of Sport and P.E. He is currently pursuing his PhD at the University of Toronto. He is also a qualified basketball coach, having coached basketball in Zambia and Norway at both youth and elite level. His research interests include HIV/AIDS, health, and community development through Sport; project development and evaluation, and sport as an empowerment for underprivileged groups including People living with HIV/AIDS, girls and women and youth.

