UNIT NO. 5

HIV/AIDS PREVENTION

Dr Jeffery Cutter, Dr Joanne Tay, Ms Eunice Yong, Mr Daniel Tung, Dr Koh Yang Huang

ABSTRACT

STIs in Singapore increased from 195 per 100,000 population in 2003 to 254 per 100,000 in 2005. The main infections, in males were non-gonococcal urethritis (incidence of 115 per 100,000 in 2005) and gonorrhoea (98 per 100,000), and in females, Chlamydia infections (41 per 100,000) and gonorrhoea (21 per 100,000). The first case of HIV/AIDS was diagnosed in 1985. As at 30 June 2006, the cumulative total was 2,852, including 1,016 deaths. Sexual transmission accounts for more than 90% of all cases. Control and prevention of HIV/AIDS comes under the central control of the Ministry of Health, with active involvement from all relevant government agencies and community groups in Singapore. The National HIV Control Programme adopts a multi-sectoral approach and comprises public education, targeted education of high-risk groups, legislation, protection of blood supply, screening, counselling and management of the infected and their contacts, surveillance of the disease, and training of personnel. There are various laws related to HIV and AIDS in Singapore and doctors should be familiar with them.

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EPIDEMIOLOGY OF SEXUALLY TRANSMITTED INFECTIONS IN SINGAPORE

Sexually Transmitted Infections (STI) are useful indicators of unsafe sexual practices in the population. Persons who suffer STIs are at increased risk of being infected with other STIs, including HIV. The commonest STIs in Singapore are gonorrhoea, non-gonococcal urethritis, syphilis, chlamydial infections, herpes simplex virus 1 and 2 infections (anogenital herpes), and human papilloma virus infections.

The overall incidence of STIs in Singapore increased from 195 per 100,000 population in 2003 to 252 per 100,000 and 254 per 100,000 in 2004 and 2005 respectively. The incidence of the main STIs in 2005 is shown in Table 1.

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Table 1. Incidence of common STIs in Singapore in 2005

Type of STI	Incidence rate per 100,000 population					
	Male	Female	Total			
Gonorrhoea	98	21	60			
NGU	115	0	58			
Syphilis	39	17	28			
Chlamydia	2	41	21			
Genital herpes	34	19	26			
Genital warts	40	10	25			

The main STIs in males are non-gonococcal urethritis (incidence of 115 per 100,000 in 2005) and gonorrhoea (98 per 100,000), while the main STIs in females are Chlamydia infections (41 per 100,000) and gonorrhoea (21 per 100,000).

The male to female ratio of reported STI cases was 2:1 in 2005. Among males, the highest rates of STI occurred in the age group 25 to 29 year-old. Among females, the highest rates occurred in the 20 to 24 year-old age group.

EPIDEMIOLOGY OF HIV IN SINGAPORE

The first case of HIV infection was reported in Singapore in 1985. Since then, the number of reported HIV cases has increased to a cumulative total of 2,852 as at 30 June 2006. 317 new cases were reported in 2005 and 149 new cases were reported in the first six months of 2006. About 88% of the cases were males and 12% were females. Among the males, 60% were single at the point of diagnosis. Among the females, the majority (61%) were married at the point of diagnosis. Sexual transmission is the main mode of transmission accounting for more than 90% of all cases, with heterosexual transmission accounting for about two-thirds of all sexually-transmitted new infections. At the end of June 2006, the cumulative number of deaths from AIDS was 1,016. Tables 2 to 6 provides further statistics of the epidemiology of HIV in Singapore up to end-June 2006.

NATIONAL STRATEGIES FOR THE CONTROL OF HIV AND AIDS IN SINGAPORE

The control and prevention of HIV and AIDS comes under the central control of the Ministry of Health, with active involvement from all relevant government agencies and community groups in Singapore. The National HIV Control Programme adopts a multi-sectoral approach and comprises public education, targeted education of high-risk groups, legislation, protection of blood supply, screening, counselling and management of the infected and their contacts, surveillance of the disease, and training of personnel. The Ministry of Health is assisted by the National HIV/AIDS Policy Committee, a multi-sectoral committee set up on 1 December 2006 to replace the National AIDS Task Force.

Table 2. Number of Singaporeans reported with HIV and AIDS (1985 - June 2006)

Year		HIV/AI	DS		AIDS				
	Male	Female	Total	Rate*	Male	Female	Total	Rate*	
1985	2	0	2	0.8	0	0	0	0.0	
1986	6	1	7	2.8	1	0	1	0.4	
1987	10	0	10	3.9	3	0	3	1.2	
1988	15	0	15	5.8	6	0	6	2.3	
1989	9	1	10	3.8	5	0	5	1.9	
1990	17	0	17	6.2	8	0	8	2.9	
1991	39	3	42	15.0	12	0	12	4.3	
1992	49	6	55	19.3	17	1	18	6.3	
1993	58	6	64	22.0	19	3	22	7.6	
1994	76	10	86	29.0	44	4	48	16.2	
1995	102	9	111	36.8	51	5	56	18.6	
1996	123	16	139	45.3	89	3	92	30.0	
1997	157	16	173	55.4	80	8	88	28.2	
1998	167	32	199	62.7	112	13	125	39.4	
1999	171	35	206	63.9	125	15	140	43.5	
2000	193	33	226	69.3	128	15	143	43.8	
2001	204	33	237	71.4	136	16	152	45.8	
2002	206	28	234	69.3	133	13	146	43.2	
2003	212	30	242	70.4	130	13	143	41.6	
2004	290	21	311	89.2	162	11	173	49.6	
2005	287	30	317	89.2	91	9	100	28.1	
Jun 2006	140	9	149		63	3	66		
Total	2,533	319	2,852		1,415	132	1,547		

^{*} per million population

Table 3. Distribution of HIV infected Singaporeans by modes of transmission (1985 - June 2006)

Mode of Transmission	1985-1999	2000	2001	2002	2003	2004	2005	Jan-Jun 2006
Sexual :								
o Heterosexual	789	190	181	181	177	188	185	88
o Homosexual	157	12	22	30	40	72	87	39
o Bisexual	114	16	16	12	14	22	14	6
Intravenous drug use	23	3	6	6	4	7	4	7
Blood Transfusion	3	0	0	0	0	0	0	0
Renal Transplant	5	0	0	0	0	0	0	0
Perinatal	12	1	2	2	1	4	3	0
Uncertain	33	4	10	3	6	18	24	9
Total	1136	226	237	234	242	311	317	149

Table 4. HIV infected Singaporeans by marital status (1985 – June 2006)

	1985 – 2005			Jan – Jun 2006		
Marital Status	Male	Female	Total	Male	Female	Total
Single	1442	63	1505	87	1	88
Married	668	191	859	42	5	47
Divorced/Separated	224	32	256	8	2	10
Widowed	59	24	83	3	1	4
Total	2393	310	2703	140	9	149

Table 5. HIV/AIDS infected Singaporeans by ethnic group (1985 - June 2006)

Ethnia Craun	1985 -	- 2005	Jan – Jun 2006		
Ethnic Group	Number	%	Number	%	
Chinese	2255	83.4	122	81.9	
Malay	241	8.9	18	12.1	
Indian/Sikh/Pakistani	123	4.6	7	4.7	
Others	84	3.1	2	1.3	
Total	2703	100.0	149	100.0	

Table 6. HIV infected Singaporeans by age and sex (1985 - June 2006)

Age at Diagnosis		1985 – 2005			Jan – Jun 2006			
(Years)	Male	Female	Total	Male	Female	Total		
0 – 9	11	13	24	0	0	0		
10 –19	18	4	22	0	0	0		
20 –29	371	112	483	27	2	29		
30 –39	848	85	933	40	4	44		
40 – 49	634	48	682	30	0	30		
50 – 59	290	33	323	26	3	29		
60 & above	221	15	236	17	0	17		
Total	2393	310	2703	140	9	149		

HIV/AIDS education

HIV prevention and education is the mainstay of the National HIV Control Programme in Singapore. This is elaborated below.

Public education

The HIV/AIDS Education Programme was started in 1985 when the first case of HIV/AIDS in Singapore was reported. Spearheaded by the Health Promotion Board, the programme aims to:

- O Increase perception of the seriousness of HIV/AIDS and the dangers of high risk sexual behaviours.
- Empower individuals to take control of their own sexual health through protective actions such as abstinence, fidelity, and consistent and correct condom usage.
- Encourage and motivate at-risk individuals to go for voluntary HIV testing and counselling.
- Encourage at-risk individuals to respect the health and wellbeing of their sexual partners.
- Promote a supportive attitude towards people living with HIV/AIDS (PLWHA).

Public education efforts have evolved over the years from an intensified mass media campaign during the month of December (World AIDS Day) to a more ongoing programme that includes pamphlet distribution, public exhibitions and forums. They have also evolved from mass to customised programmes that meet the needs of specific target groups, such as:

- a. High-risk heterosexual men
- b. Men-having-sex-with-men
- c. Freelance sex workers
- d. Women
- e. Working population

The following paragraphs describe some of these customised programmes that HPB had implemented over the past two years, in collaboration with various partners.

Education for high-risk groups

(a) High-risk heterosexual men

These are men who engage in commercial sex, have one night stands and have multiple sex partners. HPB collaborated with the Action for AIDS (AfA), a non-governmental organisation, to distribute condoms and information leaflets to men travelling to Riau Islands at local ferry terminals, and conduct 100% condom outreach at bars and nightspots.

In 2005, AfA came up with the innovative Nikki Campaign that used a fictitious sexy lady called Nikki to advocate the "condom use" message. This campaign targeted Chinese and dialect-speaking blue-collar men. Pre-recorded hotlines in English and Mandarin were set up and marketed as friendly chat lines. The phone numbers to these steamy chat lines were publicised in male toilets of coffee shops and tear-off sheets at bus shelters sited in red-light districts and industrial estates. The pre-recorded messages used a sexy female voice to prompt callers to stay faithful to their partner, or to use the condom when engaging in high risk behaviour. Following the campaign, there was a sharp increase in the number of phone calls to the Department of Sexually Transmitted Infections Control Clinic (DSC Clinic). The number of HIV screenings also increased.

(b) Men-having-sex-with-men (MSM)

The incidence of HIV/AIDS among the MSM community had over recent years been trending up. To reach this niche group,

HPB collaborated with MSM-friendly businesses such as Fridae.com, trevvy.com, Oogachaga Counselling and Support, and AfA to implement MSM-specific HIV/AIDS campaigns and programmes. These included online outreach and counselling sessions through popular MSM chat rooms and websites. The 'Think Again' campaign was conceptualised by Fridae.com and launched at MSM-friendly establishments and MSM-specific websites. Thought-provoking collaterals were distributed face-to-face and via online downloads. Safer sex training workshops to raise gay men's self-perceived vulnerability to HIV/AIDS were also conducted at gay pubs and saunas.

(c) Freelance sex workers

Project Streetwalker, a STI/HIV/AIDS outreach programme to freelance sex workers (non-brothel based), had been in place since 2004. Volunteers from AfA and the DSC Clinic ply the streets of Geylang, Desker, Changi and Orchard Towers distributing educational materials and condoms to these sex workers, and encouraging them to go for free STI and HIV testing at the DSC Clinic. Challenges include fear of arrest by the anti-vice police.

(d) Women

'Cos AIDS Isn't Sexy' was a programme conceptualised in 2006 to reach out to young single women in their 20s and 30s who frequented pubs and clubs. Posters and condom packaging were specially designed to appeal to these independent women, urging them to take greater control over their sexual health by insisting on condom use with their partner. Seven pubs implemented the programme reaching more than 15,000 female patrons.

(e) Working population

A highly subsidised package titled RESPECT was specially designed for companies and was launched in April 2006. RESPECT is an acronym that stands for Rallying Employers to Support the Prevention, Education and Control of STI/HIV/AIDS. It includes a Love Talk, Passion Exhibition Cabinets and Train-the-trainers workshop called Bridges of Hope, which was adapted from Standard Chartered Bank's 'Living with HIV/AIDS' programme. This 2-hour workshop helps participants learn more about HIV/AIDS through games, skits and role-playing which engage employees in an open and frank discussion on issues surrounding HIV/AIDS.

Early diagnosis

Early diagnosis not only allows for early treatment to retard the progress of the disease, but also allows for counselling of the infected to change risk behaviour and take precautionary measures to prevent further transmission of the disease. Those who are at risk or perceive that they are at risk of getting the infection are therefore encouraged to undergo HIV screening. To support this objective, HIV screening facilities are made easily and widely available.

To further facilitate HIV testing for early diagnosis, since July 2005, HIV testing has been made a standard of care in Singapore and is done whenever there is a medical indication, with the same preliminaries to obtain informed consent as for other clinical tests, and where knowing the HIV status will lead to a better clinical outcome for the patient.

Anonymous testing for HIV is also available in Singapore for persons who believe that they are at risk of HIV infection but prefer not to be identified to healthcare workers. Anonymous HIV testing is currently available at three sites in Singapore – two medical clinics, and AfA's anonymous HIV testing service at the Department of STI Clinic.

Antenatal screening

Antenatal HIV screening has been made a standard of care since December 2004 and HIV testing is now included as part of the routine antenatal screening package. Since its implementation, the take-up rate for antenatal HIV screening has increased to about 99% in the public hospitals and polyclinics in 2006, compared to less than 30% previously.

Protecting the blood supply

Stringent measures are undertaken to safeguard the national blood supply from HIV infection. These measures include:

- Testing of blood and blood products for HIV with nucleic acid testing (NAT).
- O Stringent donor selection at the pre-donation stage using a specially designed questionnaire. All potential donors are interviewed and have to complete a detailed questionnaire on past and present activities associated with a risk of HIV infection. The objective is to exclude potentially infected persons from donating blood. Every potential donor is then counselled by a doctor, following which he is required to declare that he has not made a false statement.
- The Centre for Transfusion Medicine (which runs the national blood bank) has also worked with the Health Promotion Board to produce educational materials on the "call-back" system which emphasises that no questions would be asked should a blood donor decide to call back for his/her blood donation to be discarded.
- O Provisions under the Infections Diseases (Amendment) Act make it an offence to furnish false information at the Blood Bank. The penalties for HIV infected person who knowingly donate blood are aimed at deterring anyone with high-risk behaviour from donating potentially tainted blood.

Care, support and treatment of the HIV-infected

Most cases are managed at the Communicable Disease Centre (CDC), Tan Tock Seng Hospital. Some patients are also treated at the Singapore General Hospital, National University Hospital, and by private specialists. Patients are counselled to ensure compliance to treatment and follow-up. Licensed anti-retroviral drugs are available for use in the treatment of HIV and AIDS.

Patients with HIV infection are supported with regular counselling. Sex partners of persons with HIV are counselled and screening is carried out for those who have been exposed to

HIV. Face-to-face counselling is given to those with high-risk behaviour. The counselling programme has been enhanced to get HIV patients to maintain low risk lifestyles.

HIV/AIDS patients have access to subsidised inpatient and outpatient care. This includes hospital, radiological and laboratory charges, treatment of complications with standard drugs, and consultation fees. Currently, there is no subsidy for anti-retroviral drugs and certain drugs used to prevent opportunistic infections, as these are considered non-standard drugs. This is no different from other non-standard drugs used in the treatment of cancer, hypertension, etc, which are also not subsidised. Patients are allowed to draw up to \$550 per month from their Medisave account for anti-retroviral drugs that are registered in Singapore. HIV/AIDS patients who require financial assistance can approach Action for AIDS or other charitable organisations for help.

To respond to the needs of the HIV infected patients, a Patient Care Centre (PCC) was set up in 1997 at the CDC. The PCC provides many services, including educational talks for patients, physiotherapy, diversional therapy, and home care services. A PCC Health Endowment Fund was established to provide financial assistance to HIV patients.

A HIV Prevention and Treatment Programme has also been established at the KK Women's and Children's Hospital (KKH). The main objectives of this programme are to provide subsidised treatment for HIV positive children, and to fund anti-retroviral therapy for pregnant women and new-borns who require treatment in the first six weeks of life. This programme is funded through the KK Outreach to Kids Fund, while the Hope Health Endowment Fund provides funding for the treatment of children infected with HIV.

Addressing stigma and discrimination

The AIDS Business Alliance was set up in 2005 to promote good practices to minimise stigma and to build a positive and non-discriminatory environment towards people living with HIV/AIDS at the workplace. The Health Promotion Board acts as its secretariat. The identity of HIV-infected persons is also protected by the Infectious Diseases Act.

LEGAL ASPECTS

While efforts are being constantly made to educate the public on HIV infection and AIDS, certain legal measures have also been taken to combat the disease in the interest of both the infected, as well as the general public. HIV infection and AIDS were made notifiable diseases under the Infectious Diseases Act in 1985.

To further strengthen control of HIV/AIDS in Singapore, the Infectious Diseases Act was amended in 1992 to include the following provisions:

 The Director of Medical Services is empowered to require any person who has been infected with HIV or diagnosed as having AIDS to undergo counselling and comply with

- specified safety measures;
- O It is an offence for a person who knows that he is infected with HIV to commit any act which is likely to transmit the disease to another person, e.g. through sexual intercourse with another person or donating blood at any blood bank in Singapore.

The Act was further amended in 1999 to facilitate the implementation of strategies to control AIDS in Singapore. These include:

- Allowing doctors to inform the spouse, ex-spouse/s and contacts of an HIV infected person if the attending doctors reasonably believe that there is significant risk of infection to such persons, and the HIV infected person has refused to inform them despite counselling;
- Making it an offence to furnish false information at the Blood Bank;
- Increasing the penalty for persons who know that they are infected with HIV but continue to donate blood or carry out activities that are likely to transmit the infection.

ROLE OF FRONTLINE HEALTH PROFESSIONALS

The reduction of HIV/AIDS infection among high-risk groups can be better achieved if frontline healthcare professionals are also involved in reaffirming educational messages to their patients whenever appropriate. Frontline healthcare professionals can also contribute to HIV prevention and control by pro-actively encouraging their patients to undergo HIV testing if they engage in any high-risk behaviours. By doing so, more HIV-infected individuals can learn their status and receive appropriate counselling and treatment.

CONCLUSIONS

The incidence of STIs in Singapore was 254 per 100,000 in 2005. The main infections, in males were non-gonococcal urethritis and gonorrhoea, and in females Chlamydia infections and gonorrhoea. As at 30 June 2006, the cumulative total of HIV and AIDS cases in Singapore was 2,852, including 1,016 deaths.

Public education on sexual health and the prevention of STI and HIV/AIDS remains a challenge in Singapore. HIV/AIDS is not perceived as a serious threat in our own backyard, but more commonly seen as an issue found in other countries. Moreover, social stigma and discrimination attached to the disease act as a barrier for at-risk persons to come forward for voluntary HIV testing, counselling and treatment.

Enlisting the support of employers and community leaders can be a powerful way to encourage the acceptability of HIV/AIDS education among various communities in Singapore. Frontline health care professionals need to be actively involved in dissemination of preventive messages and counseling risky behaviours.

TAKE HOME MESSAGES

- The incidence of STIs in Singapore increased from 195 per 100,000 population in 2003 to 254 per 100,000 in 2005. The main infections, in males were non-gonococcal urethritis (incidence of 115 per 100,000 in 2005) and gonorrhoea (98 per 100,000), and in females Chlamydia infections (41 per 100,000) and gonorrhoea (21 per 100,000).
- As at 30 June 2006, the cumulative total of HIV and AIDS cases in Singapore was 2,852, including 1,016 deaths. Sexual transmission accounts for more than 90% of all cases.
- Control and prevention of HIV/AIDS comes under the central control of the Ministry of Health, with active involvement from all relevant government agencies and community groups in Singapore.
- The National HIV Control Programme adopts a multi-sectoral approach and comprises public education, targeted education of high-risk groups, legislation, protection of blood supply, screening, counselling and management of the infected and their contacts, surveillance of the disease, and training of personnel.
- Enlisting the support of employers and community leaders can be a powerful way to encourage the acceptability of HIV/AIDS education among various communities in Singapore.
- There are various laws related to HIV and AIDS in Singapore and doctors should be familiar with them.
- Frontline health care professionals need to be actively involved in dissemination of preventive messages and counselling risky behaviours.

Annex of Resources

Contact details:

STI Clinic

DSC Clinic AM Sessions

Blk 31 Kelantan Lane #01-16 Mon - Fri : 8.00am - 11.30am (Male & Female)

Tel: 6293 9648 **PM Sessions**

www.dsc-sexualhealth.com.sq Mon - Wed : 1.00pm - 4.30pm (Male)

1.00pm - 4.00pm (Female)

: 1.00pm - 7.00pm (Male) Thur & Fri

1.00pm - 6.30pm (Female)

Anonymous HIV Test Services

Action for AIDS Anonymous Testing and Tue & Wed : 6.30pm to 8pm **Counselling Service** : 1.30pm to 3.30pm

Blk 31 Kelantan Lane #01-16 Tel: 6254 0212 www.afa.org.sg

Anteh Dispensary Family Clinic & Surgery Mon to Fri : 9am to 12noon

368 Geylang Road 2pm to 5pm

Tel: 67441809 9am to 12 noon Sat:

Sun/PH : Closed

: 9 am to 4.30pm Mon to Fri Cambridge Clinic Block 333, Kreta Ayer Road, #03-27 9 am to 12.30pm Sat:

Sun/PH : Closed Tel: 63271252

Hotline services

DSC Clinic Samaritans of Singapore

AIDS/STI 6295 2944 (24 hours) 1800 221 4444 www.samaritans.org.sg

pre-recorded information AWARE (women issues)

AIDS/STI hotline 1800 252 1324 (office hours) 1800 774 5935 www.aware.org.sg

Action for AIDS Oogachaga Counselling and Support (MSM issues) 6254 0212 or 6295 1820

9151 6979 www.oogachaga.com

USEFUL WEBSITES

Singapore

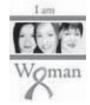
Organisation	Website	Remarks		
Health Promotion Board	www.hpb.gov.sg/aids	HPB's website with useful information on HIV/AIDS, using quiz and games to disseminate information.		
Action for AIDS, Singapore www.afa.org.sg		Singapore voluntary welfare organisation, providing information on prevention, and support for HIV+ persons.		
DSC Clinic	www.dsc-sexualhealth.com.sg	A government subsidised specialised clinic on sexually transmitted infections.		
Counselling and Care Centre www.counsel.org.sg		A non-profit agency that offers psychological counselling service. The centre aims to enhance mental health and promot marital and family living through counselling.		
Association of Women for Action and Research	www.aware.org.sg	A voluntary welfare organization that promotes gender equality. Their direct services include helpline and face to face counselling for women in need.		
The Samaritans of Singapore www.samaritans.org.s		A non-profit agency that provides 24 hours hotline service for suicide prevention.		
Oogachaga Counselling and Support	www.oogachaga.com	A charitable pro-family sexuality affirming counseling and development agency. They specialise in gender, sexuality, identity and relationship issues. Their services include face-to-face counselling and support groups.		

Overseas

Organisation	Website	Remarks
Joint United Nations Programme HIV/AIDS	www.unaids.org	Website of INAIDS, which aims to bring together on the efforts and resources of ten UN system organisations to the global AIDS response.
World Health Organisation HIV Department	www.who.int/hiv/en	The HIV/AIDS Department of the World Health Organisation (WHO) provides evidence-based, technical support to WHO Member States to help them scale up treatment, care and prevention services, as well as drugs and diagnostic support to ensure a comprehensive and sustainable response to HIV/AIDS.
Centre for Disease Control and Prevention	www.cdc.gov/hiv	CDC HIV Department website providing information on facts of HIV/AIDS and a list of useful resources.
AIDS Weekly updates (The Mining Co)	aids.about.com	A comprehensive website on HIV/AIDS, including information on basics of HIV, signs and symptoms and treatment.
Australia Federation of AIDS Organisations	www.afa.org.au	The peak non-government organisation representing Australia's community-base response to HIV/AIDS
The Body: A multimedia AIDS and HIV Resource	www.thebody.com	A service of Body Health Resources Corporation for education purposes. It has many resources on living with HIV.
The Terrence Higgins Trust (UK)	www.tht.org.uk	One of the first charities set up in UK in response to the HIV epidemic and has been at the forefront of the fight against HIV/AIDS ever since.

MATERIALS AVAILABLE

Type: Pamphlet



I Am Woman

A pamphlet specially produced for women – single, newly married and those with children - to educate them on the risks of HIV infection and AIDS and how they can protect themselves.

Item ID: Pa E 428-05



Best Sex Tips - Man / Woman

Mini pamphlets, available in male and female versions emphasise the key to sexual pleasures through mutually faithful relationships. Such relationships reduce the risk of STIs and HIV/AIDS, thus enabling the couple to focus on just the pleasure without the fears.

Item ID (Woman): Pa E 456-05 Item ID (Man): Pa E 457-05



Stop AIDS. Be Aware, Show You Care

This pamphlet explains the difference between HIV and AIDS, lists how HIV is transmitted and how the spread of HIV/AIDS can be prevented. It encourages Singaporeans to be more aware by learning the facts about HIV/AIDS, and to show they care by:

- on on putting themselves and their loved ones at risk of HIV,
- going for HIV testing if their lifestyle puts them at risk, and
- being compassionate towards those who are living with HIV/AIDS.

Item ID: Pa E 483-06

Type: Booklet



Be Safe from AIDS

A booklet about HIV and AIDS, its symptoms, methods of transmission, and how to protect against it. It also dispels common misconceptions about the modes of transmission, explains the HIV test, and encourages those who are at risk to go for testing.

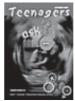
Item ID: B E 450-05



Sexually Transmitted Diseases

A 16-page booklet on STDs, their signs and how you can protect yourself from them. Available in 4 languages.

Item ID: B E 198-94/V03/R06



Teenagers Ask - Special Issue On AIDS/ Sexually Transmitted Diseases (STDs)

A magazine-style booklet that answers questions asked by teenagers about AIDS and STDs, their facts and myths.

Item ID: ZB E 348-02

For more information, please contact Health Information Centre Health Promotion Board, Level 3, 3 Second Hospital Avenue Singapore 168937

Tel: (65) 6435 3954 Fax: (65) 6536 1277

E-mail: HPB_HIC@hpb.gov.sg

PROGRAMMES AVAILABLE FROM THE HEALTH PROMOTION BOARD

RESPECT - Rallying Employers to Support the Prevention, Education and Control of STI/HIV/AIDS

A highly subsidised package specially designed for companies. It includes a Love Talk, Passion Exhibition Cabinets and Train-the-trainers workshop which engage employees in an open and frank discussion on issues surrounding HIV/AIDS.

Bridges of Hope (adapted)

A two-hour workshop that help participants learn more about HIV/AIDS through games, skits, role-playing and discussions. The session combines active learning with fun. Free and suitable for both companies and community groups.

STI and HIV/AIDS Talks

This is a simple and comprehensible session on the latest prevention and testing information on HIV/AIDS. This one-hour session is best suited for lunch talks. Free and suitable for both companies and community groups.

For more information, please contact: Communicable Disease Education

Tel: 6435 3178

E-mail: hpb_cde@hpb.gov.sg