

HEALTH CARE PARTICIPATION



Skills to Be Learned

Holistic Health Recovery Program

Client Workbook

- Learning to Be a Positive Participant in Health Care
- Increasing Patient “IQ”
- Improving Skills for Establishing and Maintaining a Partnership with Health Care Providers
- Knowing the Consequences of Non-adherence to Medication Regimens
- Improving Strategies for Identifying and Overcoming Obstacles to Adherence
- Learning Memory Aids for Improving Adherence
- Becoming Knowledgeable about HIV and Hepatitis B and C

Yale University School of Medicine
Division of Substance Abuse

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HHRP+ Workbook

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Characteristics of Long-term Survivors of HIV



- A sense of personal responsibility for their health
- A sense that they can influence their own health outcome
- A commitment to life in terms of “unfinished business,” unmet goals, or as yet unfulfilled experiences and wishes
- A sense of meaningfulness and purpose in life
- Found new meaning in life as a result of the illness itself
- Engaged in physical fitness—exercise, dietary work
- Derived useful information from, and supportive contact with, a person with the same diagnosis shortly after the diagnosis
- Became altruistically involved with other affected persons
- Accepted the reality of the diagnosis in conjunction with a refusal to perceive the condition of a death sentence
- Developed a personalized means of active coping that they believe has beneficial health effects
- Assertive, able to say “no”
- The ability to withdraw from taxing involvements and to nurture themselves
- Sensitivity to other bodies, including psychological and physical needs
- Ability to communicate openly about their concerns

Source: Solomon, Temoshok, O’Leary, & Zich (1987). An intensive psychoneuroimmunologic study of long-surviving persons with AIDS. *Annals of the New York Academy of Science*, 496, 647–655.

PREFACE

The goal of HHRP+ is to help you make certain decisions about your life, especially decisions that can affect your health. Some people who are struggling with addiction and are infected with HIV feel powerless; they think there is nothing they can do to stay healthy, and so continue to use drugs. In fact, there are many things you can do to lead a healthy, fulfilling life. Each chapter in this workbook provides relevant hand-outs and practice exercises. Material is provided in detail to help you to remember the material and to use it in your daily life.

The HHRP+ workbook is for individuals who have entered a treatment facility and have been accepted for membership in HHRP+. HHRP+ membership requires a commitment to reducing harm, promoting health, and improving the quality of life. If you are ready to make this commitment, sign the membership contract on the following page and begin your journey.

Welcome to HHRP+

The Decisional Balance Sheet (a cost-benefit analysis for following medical recommendations)



Perceived Costs	Importance Rating (0-10)	Perceived Benefits	Importance Rating (0-10)
TOTAL costs		TOTAL benefits	

Cost:Benefit Ratio = _____

HHRP+ MEMBERSHIP CONTRACT

1. I understand that this phase of my treatment program will last _____ weeks, and I agree to participate for that length of time. Although I am free to withdraw from the program at any time, I agree to discuss this decision with my counselor prior to taking this action.
2. I agree to attend all group and individual sessions (if they are offered in my facility), to be on time, and to bring my Client Workbook with me to each session. I will also call if I am going to be late.
3. I agree not to disclose the identity of any other HHRP+ member, nor will I disclose the details of any personal information revealed by other HHRP+ members during groups.
4. I understand that this treatment is intended for people who are committed to being abstinent from all illicit drugs, and who want learn how to make healthy lifestyle choices. I understand that I must work hard on my recovery in order for this program to be helpful to me.
5. I understand that I will be expected to openly discuss with my counselor any other behavior that may risk my health or the health of others, including unsafe sexual behavior and sharing of drug paraphernalia (“works”).
6. I understand that HHRP+ recommends a team approach to my treatment. If possible, I will involve my “significant other,” friend, or family member in my recovery—someone who is willing to help me with my recovery plan outside of this treatment program, and I agree to permit my counselor to communicate with this person and with my other health care providers for the purpose of coordinating my treatment.

I have reviewed the above statements with my counselor and I request to be enrolled as a member of the Holistic Health Recovery Program (HHRP+).

Client signature _____ Date _____

Counselor signature _____ Date _____

Congratulations, you have been accepted for membership in HHRP+.

Your group sessions begin at _____ (time) and end at _____ (time) on _____ (day) and meet at _____ (location). Your next individual session with your counselor is at _____ (time) on _____ (date)

Counselor’s name _____ (print) Telephone No. _____

Medication Adherence Game Worksheet

Instructions: Patient Pat has been prescribed the following medications.

Medication	Instructions for Use	Special Instructions
(A) DDI (Didanosine)	2 tablets twice a day	Take a half-hour before a full meal
(B) Viamune (Nivirapine)	1 tablet twice a day	
(C) Viracept (Nelfinavir Mesylate)	3 tablets 3 times a day	Take with a meal
(D) Erythromycin	1 pill 4 times a day	Do not eat 2 hours before or 2 hours after taking

Facts to know about Patient Pat:

Pat usually gets up at around 6:00 in the morning and goes to the clinic for methadone at 6:30. Pat usually eats 2 meals a day—breakfast at around 7:30 am, after returning from the methadone clinic, and dinner at around 6:30 pm. Pat works as a retail clerk from 9:00 am to 5:00 pm, sometimes goes out in the evening with friends, and goes to bed at around midnight. Two nights a week Pat bowls on a bowling league from 8:00 pm to 10 pm.

Potential Obstacles to Adherence

Possible Solutions

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Memory Aids to Recommend to Pat:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____



This Workbook belongs to _____

Name: _____

Address: _____

Phone: _____

Emergency Phone Numbers

Emergency: _____

Doctor: _____

Next-of-kin: _____

Pharmacy: _____

Counselor: _____

Sponsor: _____

Other: _____

Medication Adherence Game Worksheet
 (page two)

Using the letters A, B, C, D to represent the prescribed medications, create Pat's daily medication schedule below (No. = number of pills).

Time	A, B, C, D	No.
6:00 AM		
6:30		
7:00		
7:30		
8:00		
8:30		
9:00		
9:30		
10:00		
10:30		
11:00		
11:30		
Noon		
12:30 PM		
1:00		
1:30		
2:00		
2:30		

Time	A, B, C, D	No.
3:00 PM		
3:30		
4:00		
4:30		
5:00		
5:30		
6:00		
6:30		
7:00		
7:30		
8:00		
8:30		
9:00		
9:30		
10:00		
10:30		
11:00		
11:30		
Midnight		

Medical Information Sheet (Keep updated)



Family Information Sheet



Patient Name _____ Telephone No. _____
Address _____

Primary Health Care Provider:

Name _____ Telephone No. _____
Address _____

“Medication Buddy”:

Name _____ Telephone No. _____
Address _____

Health Insurance Information.

ID No. _____ Carrier _____
Allergies _____

Medications Prescribed.

Medication Name	Dose	Special Instructions	Date Discontinued

Children's Names _____ Age _____ Date of Birth _____

Grandchildren's Names _____ Age _____ Date of Birth _____

Brothers' Names _____ Age _____ Date of Birth _____

Sisters' Names _____ Age _____ Date of Birth _____

Education/Employment History



School Name	Dates Attended	Diploma/Degree

Most recent place of employment:

Company: _____

Name and phone no. of superior: _____

Dates employed: _____

Job responsibilities: _____

Special skills: _____

Hobbies: _____

Medical Information Sheet

(page two)

Other Drugs Used

Drug name	Amount/Frequency	Date Discontinued
Alcohol		
Nicotine		
Opiates		
Cocaine		
Benzodiazepines		
Marijuana		
Other:		

“Alternative” or “Complementary” Therapies Used

Drug name	Amount/Frequency	Date Discontinued
Acupuncture		
Herbal remedies		
Nutritional supplements		
Other		

Potential Obstacles to Adherence

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Possible Solutions

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Memory Aids

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

My Social Support Network



Name: _____ Phone: _____

Type of support: _____

Name: _____ Phone: _____

Type of support: _____

Name: _____ Phone: _____

Type of support: _____

Name: _____ Phone: _____

Type of support: _____

Name: _____ Phone: _____

Type of support: _____

Name: _____ Phone: _____

Type of support: _____

Name: _____ Phone: _____

Type of support: _____

Medical Language Statement



Being a **positive participant** involves taking responsibility for your health. In order to maintain or improve your physical health, you need to be well-informed about the effects of drug use and unsafe sexual practices on your health, so that you can make choices that will protect your health.

The materials in this section contain important information about HIV, Hepatitis B (HBV), and Hepatitis C (HCV), as well as other diseases that occur at high rates among drug users, their sex partners, and their children.

In order for this section to be as helpful as possible, it contains a number of medical terms that doctors and other health care professionals may use with their patients and when talking among themselves about these disorders. Some of these terms may be unfamiliar to you, and you may also find some difficult to read and pronounce. If this is the case, we encourage you to speak with your health care provider, counselor, or someone who is knowledgeable about the subject, and to become informed regarding the meaning and use of these terms. This could make your discussion with your health care providers much more productive and meaningful for you.

Remember that taking responsibility for your health means developing a high **Patient IQ**. "IQ" stands for Inform and Question: you need to **Inform** yourself about issues that trouble you; **Inform** your health care provider of your problems and concerns; and ask **Questions** of those who provide medical services to you.

Addresses and Telephone Numbers



HIV / AIDS



The human immunodeficiency virus (HIV) is the virus that causes AIDS. It is estimated that between 650,000 to 900,000 people in this country are now infected with HIV and approximately 40,000 new infections occur every year.

More than one third of all AIDS cases reported in the United States are directly or indirectly associated with drug use.

HIV is passed from one person to another through blood-to-blood and sexual contact. In addition, infected pregnant women can pass HIV to their babies during pregnancy or delivery, as well as through breast feeding. HIV causes AIDS and most people with HIV infection will develop AIDS as a result of their HIV infection. AIDS is life-threatening because the immune system of someone with AIDS has lost the ability to defend itself against life-threatening cancers and other infections.

HIV is not spread by casual contact or insect bites. Only the following body fluids have been proven to spread HIV:

- Blood
- Semen
- Vaginal fluid
- Breast milk

Getting tested

The blood tests commonly used to detect HIV infection actually determine whether antibodies have been produced by your body to fight HIV. Antibodies are produced by your immune system in response to infection, so you would only have these particular HIV antibodies if in fact you had been infected.

The window period

The period of time between when you were infected with HIV and when antibodies can be detected is called the "window period." During this window period, your HIV test result may be negative when in fact you are actually HIV-positive. **Most people will develop detectable antibodies within 3 months after infection.** The average window period is about three weeks. In rare cases, it can take up to 6 months.

It is therefore recommended that you get tested 6 months after the last possible exposure (unprotected vaginal, anal, or oral sex or sharing needles).

Name: _____
 Address: _____

 Phone: _____

Name: _____
 Address: _____

 Phone: _____

Name: _____
 Address: _____

 Phone: _____

Name: _____
 Address: _____

 Phone: _____

Addresses and Telephone Numbers

(page two)

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

HIV / AIDS

(page two)

It is very important to **get tested regularly** and to learn your test results because medications are now available that may keep you healthier longer. The less time that HIV has to multiply in your body, the better your chances for managing the disease and the more likely you can prevent transmission of HIV to your drug and sexual partners and to your partner's children.

Do not confuse HIV testing with prevention. Some people who are not well-informed think that they do not need to change their behavior if they continue to test negative for HIV. This is not true.

If you engage in any of the behaviors we just discussed with someone who has been infected, you are at risk for infection. There is no way to prevent transmission except through your own behavior. You are in control.

Interpreting your test results

If you test negative:

If you test negative, don't forget the "window period." **You may in fact be HIV-positive**, but your immune system has not yet developed detectable antibodies. However, if you still test negative six months after the last time you engaged in any high risk behavior, then you can feel assured that you have not been infected. **Do not assume that because you tested negative, that your partner must also be negative.** HIV is not necessarily transmitted every time there is exposure. So, for example, you could have had unprotected sex or shared drug paraphernalia with an HIV-positive partner without having become infected on that particular occasion. However, if you engage in high risk behavior again with this person you could still be at risk unless your partner also tested negative 6 months after his or her most recent high risk behavior.

If you test positive:

Depending on how much of the virus you have and the strength of your immune system, your doctor may prescribe some medications that will help you to stay healthy longer. **There is no cure.** If you engaged in high risk behavior any time after you were infected, you could have infected your partners or have become re-infected with a strain of the virus that does not respond well to medications. That's why it is so important for everyone to get tested. The sooner you know that you have been infected, the sooner you can begin treatment, and the sooner you can stop the spread of HIV to others.

Some people believe that they don't have to worry about getting HIV any more because they think that it can be cured with medication. THIS IS NOT TRUE. The truth is that despite medical advances, HIV remains a very serious disease that requires costly, and often complicated, treatment regimens that may slow the disease, but do not cure it.

Project Time Management Sheet



Prevent Hepatitis B: Get Vaccinated



Hepatitis B is a serious disease caused by the hepatitis B virus (HBV) that attacks the liver and can be spread to others.

Is hepatitis B a serious problem?

Yes. Each year, thousands of people of all ages get hepatitis B and about 5,000 die of chronic (life-long) liver problems caused by HBV infection. If you have had other types of hepatitis, such as hepatitis A or hepatitis C, you can still get hepatitis B.

How is hepatitis B spread?

- HBV is spread by contact with the blood of an infected person or by having sex with an infected person
- A woman who has hepatitis B can spread the virus to her baby during birth.
- HBV is spread by contact with the blood of an infected person or by having sex with an infected person

You cannot get HBV from:

- sneezing or coughing
- kissing or hugging
- sharing eating utensils of drinking glasses
- breast feeding
- food or water
- casual contact (such as an office setting)

How do you know if you have hepatitis B?

Only a blood test can tell for sure. See your doctor if you have symptoms of hepatitis (e.g., tiredness, stomach ache, joint pain, yellow skin or eyes), or if you think you have had direct contact with someone who has hepatitis B.

It is very important that all pregnant women get a blood test for hepatitis B early in their pregnancy, since a woman who has hepatitis B can spread the virus to her baby during birth.

How can you protect yourself from getting infected with HBV?

- **Get vaccinated!**
Hepatitis B vaccine is safe, effective, and your best protection.

Projects to be completed:

Date Due:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Order in which to work on projects:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Work Schedule:

- Work on: _____ from _____ to _____
- Work on: _____ from _____ to _____
- Work on: _____ from _____ to _____
- Work on: _____ from _____ to _____
- Work on: _____ from _____ to _____
- Work on: _____ from _____ to _____
- Work on: _____ from _____ to _____

Project Plan # _____

Prevent Hepatitis B: Get Vaccinated
(page two)



Project: _____

Completion date: _____

Things to Purchase: _____

Things to Gather: _____

Steps to Complete the Task:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____

• **Practice “safer” sex.**
If you are having sex, but not with one steady partner, use latex condoms correctly every time you have sex and get vaccinated against hepatitis B. Men who have sex with men should be vaccinated against both hepatitis A and hepatitis B.

• **Don't share anything that might have blood on it.**
Never share anything that might have blood on it, such as a razor or toothbrush. If you shoot drugs, get help to stop or get into a treatment program. Don't share needles, syringes, cookers, cottons, water, or rinse cups. Get vaccinated against hepatitis A and hepatitis B.

• **Think about the health risks if you are planning to get a tattoo or body piercing.**
You can get infected if the artist or piercer doesn't sterilize needles and equipment, use disposable gloves, and wash hands properly.

• **Follow standard precautions.**
If you are a health-care worker, follow standard precautions and handle needles and sharps safely. Get vaccinated against hepatitis B.

- Get hepatitis B vaccine if:**
- your sex partner has hepatitis B
 - you are a man who has sex with men
 - you have had a sexually transmitted disease (e.g. gonorrhea, syphilis)
 - you have sex with more than one partner
 - you shoot drugs
 - you live with someone who has life-long hepatitis B
 - you have a job that exposes you to human blood
 - you are a kidney dialysis patient
 - you live or travel for more than six months in countries where hepatitis B is common

Everyone under 19 years old should get vaccinated against hepatitis B!

Is the vaccine safe?
Yes. Hepatitis B vaccine is safe and effective. Millions of people have received the vaccine worldwide since 1982. **You do not need booster shots** after you complete the three-shot vaccine series.

Should you get a blood test after the three shot vaccine series to be sure that you are protected?
Most people don't need to get their blood tested after getting the vaccine. You should get a blood test 1 to 2 months after you complete the series if:

- your sex partner has chronic hepatitis B
- your immune system is not working well (i.e., you are on dialysis or you have AIDS)
- you have a job that exposes you to human blood

Babies born to infected mothers should get their blood tested at 9 to 15 months old to be sure that they are protected.

Source: Centers for Disease Control and Prevention (CDC) and National Institute on Drug Abuse (NIDA), NIH Publication Number 00-4812, printed September 2000.

Current Medical Information



Hepatitis C Prevention



Almost 4 million Americans are infected with hepatitis C virus.

Type of illness: _____

Date of illness: _____

Dates of hospitalizations: _____

Name of hospital: _____

Primary physician: _____

Medications prescribed: _____

Treatments received:

Surgery:

Surgeon:

What is hepatitis C?

Hepatitis C is a liver disease caused by the hepatitis C virus (HCV), which is found in the blood of persons who have this disease. The infection is spread by contact with the blood of an infected person.

How serious is hepatitis C?

Hepatitis C is serious for some persons, but not for others. Most persons who get hepatitis C carry the virus for the rest of their lives. Most of these persons have some liver damage but many do not feel sick from the disease. Some persons with liver damage due to hepatitis C may develop cirrhosis (scarring) of the liver and liver failure which may take many years to develop.

How can I protect myself from getting hepatitis C?

HCV is spread primarily by exposure to human blood.

- Don't ever shoot drugs! If you shoot drugs, stop and get into a treatment program. If you can't stop, use a clean needle and works every time and don't share them.
- Practice safer sex. If you have sex with multiple partners, lower your number of partners and always use barrier precautions, such as latex condoms.
- If you are a health care worker, always follow routine barrier precautions and safely handle needles and other sharps.
- Do not share toothbrushes, razors, or other personal care articles. They might have blood on them.

Hepatitis C is not spread by:

- sneezing
- hugging
- coughing
- sharing eating utensils or drinking glasses
- food or water
- casual contact

Past Medical History



Hepatitis C Prevention

(page two)

Lifetime illnesses/injuries:

Drug allergies:

Family history:

Treatments:

Provider:

Could I already have hepatitis C?

Ask your doctor for a blood test for hepatitis C if:

- you received a blood transfusion or solid organ transplant (e.g., kidney, liver, heart) before 1992.
- you were treated with a blood product for clotting problems before 1987.
- you ever injected street drugs, **even once**.
- you were ever on long-term kidney dialysis.

Why should I be tested for hepatitis C?

Early diagnosis is important so you can be:

- counseled about how to prevent transmission of HCV to others.
- checked for liver disease and get treatment, if indicated.

Many people who are at risk for hepatitis C are at risk for hepatitis A and hepatitis B. Check with your doctor to see if you should get hepatitis A and hepatitis B vaccines.

There is no vaccine to prevent hepatitis C.

Source: Centers for Disease Control and Prevention (CDC) and National Institute on Drug Abuse (NIDA), NIH Publication Number 00-4812, printed September 2000.

Safety Checklist



Endocarditis (Bacterial Endocarditis; Infective Endocarditis) (page two)

Preventive measures

- If you have heart-valve damage or a heart murmur
- Request antibiotics before medical procedures that may introduce bacteria into the blood. These include dental work, childbirth and surgery of the urinary or gastrointestinal tract.
 - Don't drink more than 1-2 if any alcoholic drinks in 1 day.
 - Consult medical professional before becoming pregnant.
 - Don't use illicit drugs like heroin or cocaine.

Expected outcome

Usually curable with early diagnosis and treatment, but recovery may take weeks. If treatment is delayed, heart function deteriorates, resulting in congestive heart failure and death.

Possible complications

- Blood clots that may travel to the brain, kidneys or abdominal organs, causing infections, abscesses or stroke.
- Heart-rhythm disturbances (atrial fibrillation is most common).

Treatment

General measures

Diagnostic tests may include laboratory blood counts and blood cultures, electrocardiogram (method of diagnosing heart diseases by measuring electrical activity of the heart), X-rays of the heart and lungs, including echocardiogram (studying the heart by examining sound waves created by an instrument placed on the chest).

- The goal of treatment is to eradicate the infecting organism with medications, and supportive care for relieving symptoms.
- Hospital care during acute phase. Once stable, some patients can continue with treatment at home.
- Surgery to replace infected valve in some patients.
- If you have damaged heart valves, tell any doctor or dentist before any treatment or procedure. Preventive antibiotics will be needed in some situations.
- Ongoing dental hygiene is important to prevent infection.
- Once you have had endocarditis, stay under a doctor's care to prevent a relapse.
- Wear a medical alert type bracelet or neck tag that indicates your medical problem. Carry a wallet card listing the antibiotic regimens needed for medical and dental procedure.

- _____ Turn down heat
- _____ Turn off stove/oven
- _____ Turn off lights
- _____ Turn off television
- _____ Turn off stereo
- _____ Turn off iron/hair dryer and other small appliances
- _____ Close windows
- _____ Take your watch
- _____ Take your wallet/purse
- _____ Take your house keys
- _____ Take a condom/bleach kit
- _____ Lock the door
- _____ Other _____
- _____ Other _____
- _____ Other _____

Cirrhosis of the Liver



Basic information

Description

Chronic scarring of the liver, leading to loss of normal liver function. It is twice as common in men as in women. Congenital cirrhosis can affect infants or young children.

Frequent signs and symptoms

Early stages:

- Fatigue, weakness.
- Poor appetite; nausea; weight loss.
- Enlarged liver.
- Red palms.

Late stages:

- Jaundice (yellow skin and eyes).
- Dark yellow or brown urine.
- Spider blood vessels of the skin (fine vessels that spread out from a central point).
- Hair loss.
- Breast enlargement in men.
- Fluid accumulation in the abdomen and legs.
- Enlarged spleen.
- Diarrhea; stool may be black or bloody.
- Bleeding and bruising.
- Mental confusion, coma.

Causes

Inflammation of the liver, accompanied by destruction of liver cells, cell regeneration and scarring. These may be preceded by:

- Prolonged, excess alcohol consumption.
- Hepatitis.
- Exposure to toxic chemical.
- Inherited causes.

Risk increases with

- Poor nutrition.
- Hepatitis.
- Excess alcohol consumption. Individuals vary widely in the amount and duration of alcohol consumption necessary to cause cirrhosis.
- Occupational exposure to chemicals toxic to the liver.

Weekly Schedule

(duplicate this page as needed)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:00 AM						
8:00						
9:00						
10:00						
11:00						
12:00 PM						
1:00						
2:00						
3:00						
4:00						
5:00						
6:00						
7:00						
8:00						
9:00						
10:00						
To do today:						

Cirrhosis of the Liver

(page two)

- Preventive measures**
- Obtain treatment for alcoholism.
 - Obtain prompt medical treatment for hepatitis.
 - Survey your work environment for possible exposure to toxic chemicals.

- Possible complications**
- Cirrhosis can be arrested if the underlying cause can be removed. Liver damage is irreversible, but symptoms can be relieved or controlled. A near-normal life is possible if treated early and treatment succeeds.
 - If the underlying cause is not removed, liver scarring will continue, resulting in death from liver failure.

- General measures**
- Life-threatening hemorrhage, especially from the esophagus and stomach.
 - Liver cancer.
 - Body poisoning and coma from a buildup of ammonia and other body waste.
 - Sexual impotence.

Treatment

- General measures**
- Diagnostic tests may include laboratory studies, such as blood and urine tests of liver function, X-ray and/or biopsy of liver.
 - Treatment methods may include drug treatment, dietary restrictions, rest and other supportive measures.
 - If cirrhosis is caused by alcoholism, stop drinking. Ask for help from family, friends and community agencies. Contact an Alcoholics Anonymous group in your community.
 - Additional Information available from the American Liver Foundation
75 Maiden Lane
Suite 603
New York, NY 10038
(800) GO-Liver (465-4837) toll-free
(888) 4HEP-USA (443-7872) toll-free
(212) 668-1000
(212) 483-8179 fax
info@liverfoundation.org

- Medication**
- Iron supplements for anemia resulting from or poor nutrition.
 - Diuretics to reduce fluid retention.
 - Antibiotics, such as neomycin, to reduce ammonia buildup.
 - Stool softeners.

Weekly Schedule

(duplicate this page as needed)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:00 AM						
8:00						
9:00						
10:00						
11:00						
12:00 PM						
1:00						
2:00						
3:00						
4:00						
5:00						
6:00						
7:00						
8:00						
9:00						
10:00						
To do today:						

Cirrhosis of the Liver

(page three)

Weekly Schedule

(duplicate this page as needed)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7:00 AM						
8:00						
9:00						
10:00						
11:00						
12:00 PM						
1:00						
2:00						
3:00						
4:00						
5:00						
6:00						
7:00						
8:00						
9:00						
10:00						
To do today:						

Activity

- Maintain as active a life as possible.
- Elevate swollen feet and legs when resting.

Diet

- In the early stages, eat a well-balanced diet that is high in carbohydrates, high in protein and low in salt.
- Late stages may require protein reduction.
- Vitamin and mineral supplements may be necessary.
- Don't drink alcohol.

Notify our office if

- You or a family member has symptoms of cirrhosis.
- The following occur during treatment:
 - Vomiting blood or passing black stool.
 - Mental confusion or coma.
 - Fever or other signs of infection (redness, swelling, tenderness or pain).

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Cellulitis



Basic information

Description

A noncontagious infection of connective tissue beneath the skin. It can affect skin anywhere on the body, but most likely on the face or lower legs. Erysipelas is the name of a severe cellulitis of the face.

Frequent signs and symptoms

- Sudden tenderness, swelling, and redness in an area of the skin. The area of cellulitis is initially 5cm to 20cm in diameter, and grows rapidly in the first 24 hours. A thin, red line often extends from the middle of the cellulitis toward the heart. Cellulitis does not develop into a boil.
- Fever, sometimes accompanied by chills and sweats.
- General ill feeling.
- Swollen lymph glands near the cellulitis (sometimes).

Causes

Infection from *Staphylococcus* or *Streptococcus* bacteria.

Risk increases with

- Use of immunosuppressive or cortisone drugs.
- Chronic illness, such as diabetes mellitus, or a recent infection that has lowered resistance.
- Any injury that breaks the skin, or underlying skin lesion.
- Intravenous drug use.
- Burns.
- Surgical wound.
- Diabetes mellitus.
- Immunosuppression due to illness or medications.

Preventive measures

- Avoid skin damage. Use protective clothing or gear if you participate in strenuous work or sports.
- Keep the skin clean.
- Avoid swimming if you have skin lesion.

Expected outcome

Usually curable in 7 to 10 days with treatment, unless the patient has a chronic disease or is receiving immunosuppressant treatment; in that case, cellulitis may lead to blood poisoning and become life threatening.

Weekly Schedule

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To do today:						

Cellulitis

(page two)

Weekly Schedule

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To do today:						

Possible complications

Blood poisoning, if bacteria enter the bloodstream.
Brain infection or meningitis, if cellulitis occurs on the central part of the face.

Treatment

General measures

- For diagnosis, laboratory studies or a skin biopsy may be recommended.
- The usual treatment is with an antibiotic.
- Use warm-water soaks to hasten healing and relieve pain and inflammation.
- If excess fluid is lost from the skin, hospitalization may be necessary to provide adequate hydration.
- Elevation and restricted movement of the affected area can help reduce swelling.

Medication

Antibiotics to fight infection. Finish the prescribed dose, even if symptoms disappear quickly.

Activity

Rest in bed until fever disappears and other symptoms improve. Resume your normal activities as soon as symptoms improve.

Diet

No special diet.

Notify our office if

You or a family member has symptoms of cellulitis, especially on the face.

The following occur during treatment:

- Fever.
- Headache or vomiting.
- Drowsiness and lethargy.
- Blister over the area of cellulitis.
- Red streaks that continue to extend, despite treatment.
- New, unexplained symptoms develop. Drugs used in the treatment may produce side effects.

Osteomyelitis



Basic information

Description

Infection of the bone and bone marrow. It can involve any bone in the body. In a child, the femur (upper-leg bone), tibia (lower-leg bone) or humerus or radius (bones in the arm) is usually affected. In an adult, the pelvis or spine is usually affected. It can affect both sexes and all ages, but is more common in rapidly growing children (5 to 14 years), especially males.

Frequent signs and symptoms

- Fever. Sometimes this is the only symptom.
- Pain, swelling, redness, warmth and tenderness in the area over the infected bone, especially when moving a near by joint. Nearby joints, especially the knee, may also be red, warm and swollen.
- If a child is too young to talk, signs of pain are reluctance to move an arm or leg or refusal to walk; limping; or screaming when the limb is touched or moved.
- Pus drainage through a skin abscess, without fever or severe pain (chronic osteomyelitis only).
- General ill feeling.

Causes

Usually staphylococcal infection, but many other bacteria may be responsible. The bacteria may spread to the bone through the bloodstream from the following sources.

- Compound fracture or other injury.
- Boil, carbuncle or any break in the skin.
- Middle-ear infection.
- Pneumonia.

Risk increases with

- Illness that has lowered resistance.
- Rapid growth during childhood.
- Diabetes mellitus.
- Implanted orthopedic device (artificial knee).
- Intravenous drug use.

Weekly Schedule

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Osteomyelitis

(page two)

Weekly Schedule

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To do today:						

Preventive measures

Obtain prompt medical treatment of any bacterial infection to prevent its spread to bone or other body parts.

Expected outcome

Usually curable with prompt and aggressive treatment.

Possible complications

- Abscess that breaks through the skin and won't heal until the underlying bone heals.
- Permanent stiffness in a nearby joint (rare).
- Fracture.
- Loosening of implanted orthopedic device.
- May require amputation if circulation is blocked or severe gangrene infection occurs (rare).

Treatment

General measures

- Diagnostic tests may include laboratory blood studies and blood cultures to identify the bacteria, radionuclide bone scan, CT or MRI scans. X-rays often don't show changes until 2 to 3 weeks after the infection begins.
- Treatment involves medications, rest and other supportive measures.
- Keep the involved limb level or slightly elevated and immobilized with pillows. Don't let it dangle.
- Keep unaffected parts of the body as active as possible to prevent pressure sores during required, prolonged bed rest.
- Hospitalization may be necessary for surgery to remove pockets of infected bone, and/or to administer high doses of antibiotics sometimes intravenously.
- A previously implanted orthopedic device (artificial, knee) may need to be removed (sometimes a replacement can be implanted at the same time).

Medication

- Large doses of antibiotics. With powerful new antibiotics, intravenous administration, once a necessity, may no longer be needed. Antibiotics may be necessary, either orally or by injection for 8 to 10 weeks.
- Pain relievers.
- Laxatives, if constipation develops during prolonged bed rest.

Weekly Schedule

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To do today:						

Osteomyelitis

(page three)

Activity

Rest in bed until 2 to 3 weeks after symptoms disappear. Resume your normal activities gradually.

Diet

No special diet. Eat a nutritionally balanced diet. Take vitamin and mineral supplements if needed.

Notify our office if

You or your child has symptoms of osteomyelitis.

The following occur during treatment:

- An abscess forms over the infected bone, or drainage from an existing abscess increases.
- Fever.
- Pain becomes intolerable.
- New unexplained symptoms develop. Drugs used in treatment may produce side effects.

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Weekly Schedule

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Group Seven

HEALTHY LIFESTYLE CHOICES

Skills to Be Learned

- Stress Management
- Coping Skills
- Nutritional Guidelines and Food Hygiene

Stress Management



Relaxation techniques decrease the negative health consequences of stress.

Menu of relaxation techniques to try:

- Visualization/guided imagery
- Progressive Muscle Relaxation (PMR)
- Deep breathing
- The Relaxing Sigh
- Positive affirmations
- Autogenic training
- Meditation

Relaxation techniques are available commercially on audio and video tape, or you can create your own. Books are available at your library and book stores.

Relaxation takes practice. Devote at least 15 minutes twice daily to your relaxation technique. You should notice results within two weeks.

This week I commit to do the following stress management technique twice daily at _____ (time) and _____ (time) for at least 15 minutes:

_____ (technique)

I am calm and relaxed.

Weekly Schedule

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Exercise



Moderate exercise may strengthen your immune system, increase your energy level and self-esteem, and decrease stress and anxiety.

Menu of exercises to try (in moderation):

- Gentle stretching**
- Brisk walking**
- Swimming**
- Weight training**
- Yoga**
- Tai Chi**
- Cycling**
- Skipping rope**
- Dancing**

Never exercise to the point of exhaustion.

Check with your health care provider before beginning any exercise program.

This week I commit to do the following exercise daily at _____ (time) for at least 15 minutes: _____ (exercise)

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Sleep



1. Establish a sleep schedule. Go to bed and get up at around the same time each day.
2. Get sufficient sleep. Healthy adults require eight to eight-and-a-half hours of sleep per night.
3. Use your bedroom only for sleeping or sleep-related activities.
4. Create a sleep-promoting environment. Your bedroom should be cool, quiet, and without any bright light shining in the windows.
5. Don't drink alcohol or caffeinated beverages within six hours of bedtime and don't smoke immediately before going to bed.
6. Have a glass of milk or light carbohydrate snack before bedtime.
7. Relax for at least 30 minutes before bedtime.
8. If you are not asleep within 30 minutes, get up and engage in a quiet activity until you feel sleepy.
9. Exercise regularly, but not right before bedtime.
10. If you take a nap during the day, do not sleep for more than 30 minutes, and don't nap after 3 p.m.

This week I commit to trying the following strategy in order to improve my sleep: _____

Consult your health care provider if your sleep problems persist.

January 2005

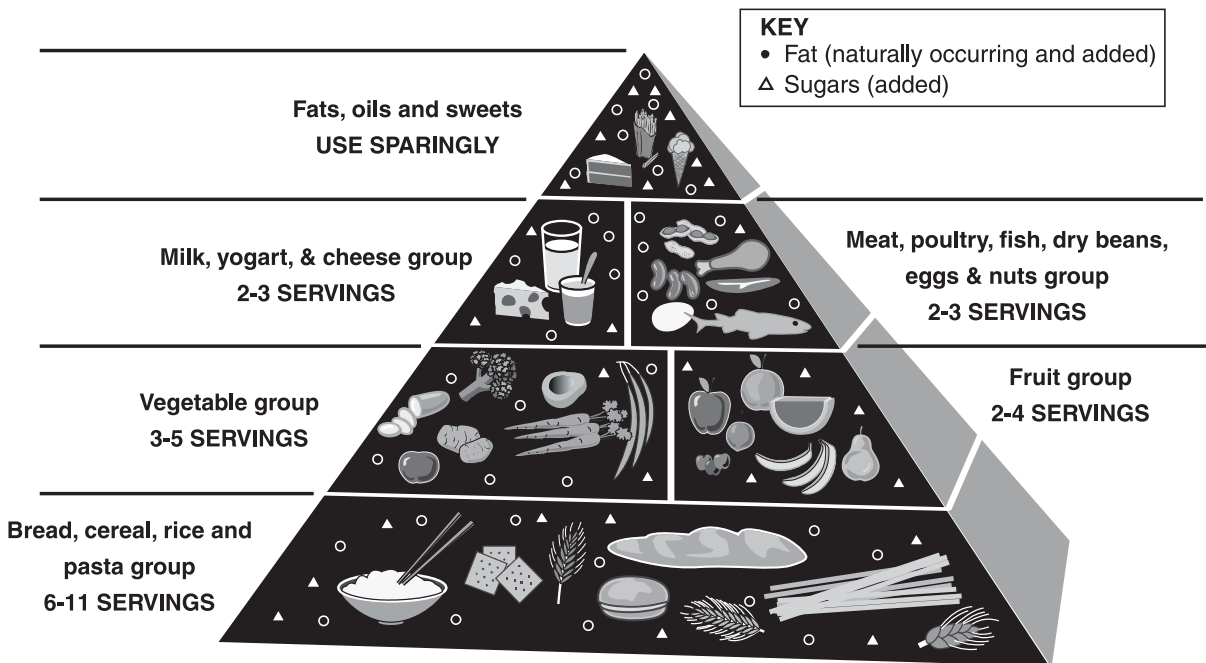
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February 2005

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FDA Food Pyramid

HHRP⁺



Nutrition and HIV



Getting the Benefits of Good Nutrition

Good nutrition is important for everyone. But it's essential for people infected with human immunodeficiency virus (HIV). This virus affects the body's ability to fight infection and causes AIDS (acquired immunodeficiency syndrome).

One of the key components of treatment for HIV infection is a nutritious diet. Timing is important—the sooner good nutrition starts, the more successful you can be at staying healthier. Eating enough of the right balance of foods may help prevent weight loss and fatigue, improve comfort and sense of well-being, and contribute to quality of life.

This booklet presents information you can use to plan a healthy diet. It also suggests ways to help you overcome eating problems resulting from your illness or medical treatment.

Building a Nutritious Diet

Protein, carbohydrate, fat, vitamins, minerals, and water are the nutrients needed to maintain body functions. A diet containing the right balance of these nutrients promotes health and well-being. Use the following general guidelines to plan a diet that gives your body enough of these nutrients.

Fat and lactose (milk sugar) can be hard to digest. If you begin experiencing nausea or diarrhea, cut back on fat and/or lactose until symptoms improve. And remember, try different foods to find out which ones agree with you; everyone responds differently to various foods and to the same food from one time it's eaten to the next.

Every day...

- Drink two cups or more of lowfat milk or buttermilk, or substitute two or three servings of lowfat cheese, cottage cheese, yogurt, ice cream, custard, or pudding made with milk.
- Eat two or more 2- to 3-ounce servings of lean meat or other foods containing protein, such as eggs, fish, poultry, dried beans and peas, peanut butter, and nuts and seeds.
- Eat or drink two or more half-cup servings of fresh, frozen, or canned fruit or fruit juice. At least one of the servings should be a citrus fruit or juice. Wash fresh fruit thoroughly before cooking or eating.
- Eat three or more half-cup servings of vegetables. At least one serving should be a dark-green, leafy vegetable or a yellow vegetable. Wash fresh vegetables thoroughly before cooking or eating.
- Eat six or more servings of bread or other baked goods, cereal, rice, pasta, or grain products.
- Eat other foods such as desserts, margarine, condiments, and beverages when you want them. These foods add flavor, variety, and calories to your diet.

Power-Packing Your Diet

Increasing the calorie and protein content of your diet is a good habit to start right now. For other ways to boost calories and protein without increasing serving sizes, try the follow-

March 2005

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ing suggestions. You may need to modify them if you're having a problem with diarrhea, fat, or lactose intolerance (see "Solving Problems").

To add calories...

- In cooking, use heavy cream, whole milk, or evaporated whole milk instead of water whenever possible.
- Top baked potatoes, vegetables, and fruits with sour cream. One tablespoon adds about 30 Calories.
- Use butter or margarine on hot foods such as toast, vegetables, cooked cereals, and rice. One teaspoon adds about 35 Calories.
- Spread bagels and toast with cream cheese. One tablespoon adds about 50 Calories.
- Eat fruits canned in heavy syrup. Stir canned fruit into yogurt or use it to top cereal and ice cream and other desserts.
- Sweeten toast, cereals, and fruits with sugar, jelly, and honey.

To add protein...

- Make "double-strength milk" by adding nonfat dry milk powder to regular whole milk. Chill well before drinking to enhance the flavor. Use double-strength milk in cooking and for milkshakes.
- Add grated cheese to cream sauces, casseroles, and vegetables. One ounce of American cheese contains approximately seven grams (g) of protein.
- Serve cottage cheese with canned fruit. One-half cup of cottage cheese provides about 15 g of protein.
- Have peanut butter with an apple, banana, or pear; spread it on crackers; or use it as a sandwich spread with jelly, jam, or preserves. One tablespoon of peanut butter provides about 95 Calories and four g of protein.
- Blend finely chopped hard-cooked eggs into sauces, soups, and casseroles. One large egg provides about seven 7 g of protein. Don't eat raw or soft-cooked ("sunny-side up") eggs or foods containing raw eggs.

To add complete nutrition...

There's an alternative strategy for adding calories and protein, as well as carbohydrates, fat, vitamins, and minerals, when your nutritional intake is less than ideal. Advera® Specialized, Complete Nutrition is a nutritional product specifically designed for people with HIV infection or AIDS. Advera is high in calories to meet the body's increased need for them. It's also high in protein and low in fat and has fiber to maintain normal bowel function. Advera may be the answer when you...

- Don't feel like eating.
- Don't have the time or energy to fix a balanced meal.
- Are consistently not eating enough of the right kinds of foods and recognize the need for good nutrition.

Consult your physician regarding your specific needs.

Advera® is available in chocolate, vanilla and orange cream flavors. It tastes best chilled.

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Preventing Illness Caused by Improper Food Handling

Guard against food-borne illnesses. When your immune system is suppressed, your body becomes less effective at fighting bacteria that can grow in improperly handled foods. Food-borne illnesses are preventable when food is stored, prepared, and served properly. The following guidelines can help you lower your risk of food-borne illnesses.

- Store foods at safe temperatures—cold food below 40° F, hot food above 140°F. Don't leave food at room temperature for more than two hours.
- Thaw frozen food in a refrigerator or defrost in a microwave oven. Don't thaw food at room temperature.
- Refrigerate or freeze perishable items as soon as possible. Use airtight containers, plastic wrap, or aluminum foil to protect opened foods.
- Buy foods in amounts that can be eaten before they spoil. Never use food you think may be spoiled. Don't use cans with bulges or those with leaks or dents along the seams.
- Wash your hands thoroughly with warm, soapy water before handling or eating food.
- Wash fresh fruits and vegetables before eating or cooking them.
- Use a cutting board made of plastic or marble, not wood. Use separate cutting boards for raw and cooked foods. Wash all food preparation utensils in hot, soapy water.
- Thoroughly cook meat, fish, poultry, and eggs. Don't eat raw meat, raw seafood, or raw fish dishes, such as sushi.
- Avoid luncheon meats and cheeses from the deli case; they may contain harmful bacteria from improper food handling. Use prepackaged, processed meats and cheeses instead.
- Use only pasteurized milk products.
- Heat leftovers thoroughly to an internal temperature of 165°F.

Solving Problems

Eat well when you feel well. Keep high-calorie snacks (see pages 4 and 5, "Power-Packing Your Diet") available for when your appetite is good—for example, raisins and other dried fruits, peanut butter or cheese with crackers, yogurt, and nuts and seeds.

Sometimes you may have symptoms that interfere with eating. The following suggestions will help you meet nutritional needs, conserve energy or soothe an upset stomach during these times.

When you're tired...

- Take advantage of the nutritious meals available in the frozen-food section of your grocery store.
- Accept friends' and relatives' offers to help prepare food.
- Freeze leftovers and extra portions for later.
- Check into home food-delivery services such as "Meals on Wheels" or carry-out and delivery services offered by many restaurants.
- Use Adverra® as an oral supplement or meal replacement when you can't prepare or eat a full meal.

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When you're nauseated...

- Wait until you feel better to eat full meals. Eat small, frequent meals rather than three large ones.
- Sip cool beverages, such as clear fruit juices and drinks and carbonated beverages (ginger ale, lemon-lime). Eat fruit ices, dry toast (if your mouth and/or throat is sore, dunk toast in juice or tea to soften), or crackers to calm your stomach.
- Choose bland foods that are not greasy or too sweet, such as broth with crackers, gelatin with fruit, and apple juice.
- Eat cold main courses—chicken salad instead of hot fried chicken, for example. Stay out of the kitchen when food is being prepared, and eat in well-ventilated areas. The smell of food or cooking can add to feelings of nausea.
- Ask your doctor about medicine to control nausea.

When you have diarrhea...

- Consider using a rehydration product such as EqualYTE® Enteral Rehydration Solution that provides needed electrolytes and fluid to prevent dehydration. Beverages such as fruit juices (apricot and pear nectar, apple juice) or Popsicles® and gelatin can be used for additional fluids.
- Drink liquids between meals rather than with meals.
- Because they can make diarrhea worse, decrease or avoid foods and drinks that contain fat, such as cream, sour cream, cream sauce, luncheon meats, bacon, sausage, regular cheeses, oil, mayonnaise, salad dressing, nuts, avocados, olives, peanut butter, butter and margarine, and high-fat snack foods such as potato and corn chips. Try lowfat alternatives (cheeses, sour cream, and salad dressings, for example).
- Decrease or avoid lactose-containing foods while you have diarrhea. Lactose-containing foods include milk; milk powder; ice cream; milk-containing desserts, soups, and baked goods; and cheese and yogurt. Try lactose-free or lactose-reduced dairy products.
- Select foods that are easily digested and absorbed such as peeled, cooked fruits and vegetables, bananas, applesauce, cooked cereal, and rice.
- Eat small, frequent meals.
- Ask your doctor, dietitian, or nurse about using Advera® which is nutritionally complete and low in fat, and contains fiber to help maintain bowel function.
- Avoid foods that have a laxative effect (prunes and prune juice, raw fruits and vegetables) when you have diarrhea. They may make the diarrhea worse.
- Don't eat or drink foods and beverages that contain caffeine such as coffee, tea, cola, and chocolate.

When your mouth and throat are sore...

- Drink soothing beverages such as apple juice, fruit nectars, and milk (if diarrhea is not a problem). A sore mouth or throat may be irritated by highly spiced foods and carbonated drinks or liquids containing salt (such as broth or vegetable juice), or those containing acid (such as orange juice).
- Drink liquids and semisolid foods through a straw.
- Select soft, moist foods such as macaroni and cheese; casseroles; canned fruits and ripe, peeled, soft fresh fruits* (bananas, pears, peaches); scrambled eggs; stews; mashed pota-

July 2005

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Nutrition and HIV

(page five)

toes with gravy; puddings and custards; and sherbets, yogurt, ice cream, and milkshakes. Avoid sticky, hard-to-swallow foods such as peanut butter and dry, rough foods such as popcorn, potato chips, and raw vegetables that can irritate sensitive mouths and throats. Dunk toast, cookies, doughnuts, and crackers in milk, tea, juice, or soup to soften them and make them easier to swallow.

- Use melted butter or margarine, gravy, broth, sauces, or syrup to moisten food.
- Make sure foods and beverages are at room temperature before eating or drinking them. Avoid foods that are very hot or very cold.
- Use Advera® as an oral supplement or meal replacement sipped through a straw.
- Talk to your doctor about medicine to numb your mouth and throat.

When your sense of taste changes...

- If red meat tastes bitter, select other foods containing protein such as cheese, eggs, poultry, yogurt, tuna, and peanut butter. Try marinating meat in soy sauce, wine, or fruit juice.
- Serve protein foods cold or at room temperature.
- Add interest to foods with seasonings and flavorings such as basil, oregano, garlic, onion, bacon bits, and lemon and lime juices.
- Add fresh or canned fruit to milkshakes and ice cream.
- Drink liquids with solid foods.
- Use Advera® as an oral supplement or meal replacement.

*Avoid fresh fruit if diarrhea is a problem.

September 2005

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Weekly Meal Planner for the week of _____



Sunday

Things to buy

Breakfast

Lunch

Dinner

Monday

Things to buy

Breakfast

Lunch

Dinner

Tuesday

Things to buy

Breakfast

Lunch

Dinner

Wednesday

Things to buy

Breakfast

Lunch

Dinner

October 2005

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Weekly Meal Planner
 for the week of _____
 (page two)

Thursday Things to buy

Breakfast _____

Lunch _____

Dinner _____

Friday Things to buy

Breakfast _____

Lunch _____

Dinner _____

Saturday Things to buy

Breakfast _____

Lunch _____

Dinner _____

Additional items to buy:

To Do Today



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Group Eight

INTRODUCTION TO THE 12-STEPS

Skills to Be Learned

- Identifying What Is and Is Not Controllable
- Understanding When to Let Go and When to Take Action
- Identifying One's Personal Source of Strength
- Increasing Motivation for Change

HHRP+ Client Workbook

Twelve Steps in a Journey of Recovery



HHRP+ Groups:

- 1. Reaching your goals 1
- 2. Reducing the harm of injection drug use 7
- 3. Harm reduction with latex 12
- 4. Negotiating harm reduction with partners 22
- 5. Preventing relapse to risky behavior 27
- 6. Health care participation 33
- 7. Healthy lifestyle choices 61
- 8. Introduction to the 12-Step Program 76
- 9. Overcoming stigma 80
- 10. Motivation for change: overcoming helplessness 84
- 11. Moving beyond grief 88
- 12. Healthy social relationships and activities 93

Having had a spiritual awakening as the result of these steps, we tried to carry this message to others, and to practice these principles in all our affairs."
Share by doing. **12**

"Sought through prayer and meditation to improve our conscious contact with God as we understood him, praying only for knowledge of His will for us and the power to carry that out."
Continue to grow to highest potential. **11**

"Continued to take a personal inventory and when we were wrong promptly admitted it."
Maintain your new healthier life. **10**

"Made direct amends to such people whenever possible, except when to do so would injure them or others."
Demonstrate your regret. **9**

"Made a list of all persons we had harmed, and became willing to make amends to them all."
Identify harm you've caused. **8**

"We humbly asked Him to remove our shortcomings."
Begin to make the personal changes necessary to heal your life. **7**

"We were entirely ready to have God remove all these defects of character."
Be ready to change – Choose to let go of your old lifestyle. **6**

"We admitted to God, to ourselves, and to another human being the exact nature of our wrongs."
Tell someone else what you need to change about yourself. **5**

"We made a searching and fearless moral inventory of ourselves."
Identify what you need to change about yourself. **4**

"We made a decision to turn our will and our lives over to the care of God as we understood Him."
Make the decision to heal your life. **3**

"We came to believe that a power greater than ourselves could restore us to sanity."
Hope for the future – Believe that a healing power exists. **2**

"We admitted that we were powerless over our addiction, that our lives had become unmanageable."
Accept what cannot be changed – Effect of drugs and current HIV+ status. **1**

REACHING YOUR GOALS

12-Step Game Blank Worksheet



Instructions: In each of the larger boxes above is one of the Twelve Steps. In the smaller box, write the number (1 through 12) that corresponds to correct order of the Steps.

Skills to Be Learned

- Improving Memory and Concentration
- Setting Goals
- Establishing Priorities
- Action Initiation

<p>Continued to take a personal inventory and when we were wrong promptly admitted it.</p>	<p>Made direct amends to such people whenever possible, except when to do so would injure them or others.</p>	<p>We were entirely ready to have God remove all these defects of character.</p>
<p>Made a list of all persons we had harmed, and became willing to make amends to them all.</p>	<p>We admitted that we were powerless over our addiction, that our lives had become unmanageable.</p>	<p>We made a searching and fearless moral inventory of ourselves.</p>
<p>We made a decision to turn our will and our lives over to the care of God as we understood Him.</p>	<p>We humbly asked Him to remove our shortcomings.</p>	<p>We admitted to God, to ourselves, and to another human being the exact nature of our wrongs.</p>
<p>Having had a spiritual awakening as the result of these steps, we tried to carry this message to others and to practice these principles in all our affairs.</p>	<p>We came to believe that a power greater than ourselves could restore us to sanity.</p>	<p>Sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out.</p>

Prioritizing Lifetime Goals



Instructions: Select your three most important goals and write them in order of importance below, with No. 1 being the most important of the three (a sample No. 1 has been completed for you).

Sample Goal Living a healthy lifestyle

List activities necessary to accomplish this goal:

Examples:

- | | |
|---------------------------------|--------------------------|
| Take prescribed medications | Always use condoms/latex |
| Stay in HHRP+ treatment program | Keep doctor appointments |
| Eat healthy foods | Do relaxation techniques |
| Remain abstinent | Exercise |
| Take vitamins | Think positively |
| Drug-free leisure activities | Other _____ |

Activity I can do during the next week towards my goal:

Stay in HHRP+ treatment program (Write on To-Do List)

My three most important lifetime goals are:

Write Goal No. 1 here _____

List activities necessary to accomplish this goal:

Activity I can do during the next week towards my goal: _____

_____ (Write on To-Do List)

Write Goal No. 2 here _____

List activities necessary to accomplish this goal:

Activity I can do during the next week towards my goal: _____

_____ (Write on To-Do List)

Write Goal No. 3 here _____

List activities necessary to accomplish this goal:

Activity I can do during the next week towards my goal: _____

_____ (Write on To-Do List)

OVERCOMING STIGMA

Skills to Be Learned

- Understand the Consequence of Stigmatization
- Decreasing the Strength of "Addict" Self-identity
- Connecting with "Core/Ideal" Self
- Identifying and Strengthening Cognitive, Affective, and Behavioral Attributes of Healthier, Non-drug Using, Lifestyle
- Redefining the Self as a Non-drug User

Step-by-Step Planning Worksheet



(Part II) My Self-affirmation Statement

I am: _____

Locations to place self-affirmation cards:

1. _____
2. _____
3. _____

I will visualize my "ideal" self daily at ____ am/pm. My visualization will include (copy from handout):

- Thought _____
- Behavior _____
- Feeling _____

Memory aid for visualization. I will remember to do my visualization by: _____

I plan to act "as if" I have this attribute by doing the following:

1. _____
2. _____

One week from today I will rate my progress by rating the strength of my "addict" and "ideal" selves:

How much did I experience my "addict" self in the past week?

0	1	2	3	4
not at all		moderately		extremely

How much did I experience my "ideal" self in the past week?

0	1	2	3	4
not at all		moderately		extremely

Goal: _____

To-Do List	Date
------------	------

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Block out time

- Work on Step 1: _____ from _____ : _____ (time) to _____ : _____ (time) on _____ (date)
- Work on Step 2: _____ from _____ : _____ to _____ : _____ on _____
- Work on Step 3: _____ from _____ : _____ to _____ : _____ on _____
- Work on Step 4: _____ from _____ : _____ to _____ : _____ on _____
- Work on Step 5: _____ from _____ : _____ to _____ : _____ on _____
- Work on Step 6: _____ from _____ : _____ to _____ : _____ on _____

REDUCING THE HARM OF INJECTION DRUG USE

Skills to Be Learned

- Identifying the Harm of Injection Drug Use
- Learning Harm Reduction Techniques (e.g., needle cleaning)
- Reducing Cue-elicited Craving

MOTIVATION FOR CHANGE: OVERCOMING HELPLESSNESS

Skills to Be Learned

- Understand the Source and Consequences of Helplessness
- Identify Situations in Which You Can Become Empowered
- Assess Readiness for Change
- Increase Motivation to Pursue a Healthy Lifestyle

How to Bleach-clean Needles



1. Rinse syringe with water to remove any visible drug or blood.
2. Submerge needle; fill barrel of syringe with bleach.
3. Shake/tap needle while bleach is in it to break up clots.
4. Keep bleach in syringe for at least 30 seconds.
5. Squirt out bleach into waste cup (or into cooker if that is also being cleaned).
6. REPEAT Steps 2-5 using new bleach and shake/tap for another 30 seconds.
7. Fill a disposable cup with water and fill the syringe.
8. Squirt out water into waste cup (or cooker).
9. Rinse again with clean water.
10. Eject water into waste cup (or into cooker to rinse that with water also).
11. Take the syringe apart and clean the plunger in bleach.

Remember: Less than 30—it's still dirty!

Readiness Assessment



Instructions: Circle **one** of the responses in each of the four boxes.

Sexual Practices	Illegal Drug Use
<ol style="list-style-type: none"> 1. I have no intention to start using condoms every time I have sex. 2. I am seriously considering starting to use condoms soon, but haven't made any definite preparations yet. 3. I am now actively preparing myself to begin engaging in safer sexual practices, but haven't started yet. 4. I've used condoms <i>every time I have sex for less than six months.</i> 5. I've been using condoms <i>every time I have sex for longer than six months.</i> <p>Stage: _____</p>	<ol style="list-style-type: none"> 1. I have no intention to quit using all illegal drugs. 2. I am seriously considering quitting all illegal drugs but haven't made any definite preparations yet. 3. I am now actively preparing myself to quit using all illegal drugs, but haven't quit yet. 4. I have now stopped using all illegal drugs and have been <i>completely abstinent for less than six months.</i> 5. I stopped using all illegal drugs and have been <i>completely abstinent for more than six months.</i> <p>Stage: _____</p>
Health Care	Sharing Drug Paraphernalia
<ol style="list-style-type: none"> 1. I have no intention to see a doctor regularly; take all medications as directed and be active in my own health care. 2. I am seriously considering becoming more active in my health care, but haven't made any definite preparations yet. 3. I am now actively preparing myself to form a partnership with my health care provider so that I can participate more actively, but haven't done so yet. 4. I have now begun participating actively in my health care and have been <i>100% compliant with all medical recommendations for less than six months.</i> 5. I have been participating actively in my health care and have been <i>100% compliant with medical recommendations for more than six months.</i> <p>Stage: _____</p>	<ol style="list-style-type: none"> 1. I have no intention to stop sharing drug paraphernalia with other people (e.g., needles, cookers, cotton, rinse water). 2. I am seriously considering not sharing paraphernalia any more, but haven't made any definite preparations yet. 3. I am now actively preparing myself to stop sharing paraphernalia, but haven't stopped yet. 4. I stopped sharing drug paraphernalia and <i>haven't shared anything for less than six months.</i> 5. I stopped sharing drug paraphernalia and <i>haven't shared anything for more than six months.</i> <p>Stage: _____</p>

The ABCs of Reducing the Harm of Injection Drug Use

HHRP+

A = Abstinence

B = Buy or obtain new needles

C = Clean needle with full-strength bleach

A = Abstinence

Because any drug use is dangerous, the best way to prevent harm is by abstaining from drugs.

B = Buy or obtain new needles – Never share needles/works.

Other than abstaining from injection drug use, the second best way of avoiding harm is by always using a new needle—never share needles or works and don't reuse needles even if not shared with others. There are two reasons to always use new/sterile needles. First, it is the best way to be sure a needle is not contaminated. Second, because used needles (even ones that have been cleaned) are less sharp, they are more likely to harm/collapse your veins than new ones.

- **Never** assume a needle bought on the street is new even if it is in a wrapper.
- Besides getting new needles from a drug store, the best way to be sure you're getting a sterile needle is by using **needle exchange programs**.

C = Clean your needle/works with full-strength household bleach.

When you're not abstinent and don't have a new needle, the next best way of reducing the harm of injection drug use is by cleaning your needles/works with bleach.

Procedure:

1. Thoroughly rinse the syringe with water to remove any apparent blood or drug.
2. Submerge needle, fill barrel of syringe with bleach.
3. Shake/tap needle while bleach is in it to break up clots.
4. Keep bleach in syringe for **at least 30 seconds**. Remember: **Less than 30, it's still dirty!**
5. Squirt out bleach into waste cup (or cooker).
6. **Repeat Steps 2-5** using new bleach and shake/tap for **another 30 seconds**.
7. Fill a disposable cup with water and fill the syringe.
8. Squirt out water into waste cup (or cooker).
9. Rinse again with clean water.
10. Eject water into waste cup (or cooker).
11. Take the syringe apart (remove the plunger) to improve the cleaning procedure.

Additional tips:

1. Never dilute the bleach with water; diluted bleach is less effective for killing HIV.
2. Never re-use bleach or rinse water.
3. Clean your needles before the blood inside them has a chance to dry; dried blood is harder to clean out of the needle.
4. Never put needle into the rinse water bottle; fill disposable cups with rinse water.
5. If you are unable to get bleach, do not inject drugs; other cleaning methods are not as effective at killing HIV.
6. Heating drug solution in a cooker for at least 15 seconds may also help to inactivate HIV.

Stage of Change Graduation Game Worksheet

HHRP+

My current Stage of Change: In the space provided below, write the name of the stage (precontemplation, contemplation, action, preparation, or maintenance) from your Readiness Assessment.

Sexual practices _____ Health care _____
 Drug use _____ Sharing "works" _____

The behavior I'm most *ambivalent* about changing is: Select the behavior, from the four above, that you are least motivated to change and write it here. _____

List the reasons for not wanting to change your behavior (costs):

1. _____ 6. _____
2. _____ 7. _____
3. _____ 8. _____
4. _____ 9. _____
5. _____ 10. _____

(a) Total number of costs of change and enter here:

List the potential benefits of change:

1. _____ 6. _____
2. _____ 7. _____
3. _____ 8. _____
4. _____ 9. _____
5. _____ 10. _____

(b) Total the number of potential benefits of change and enter here:

(c) Subtract costs (a) from benefits (b) and enter results here:

Write in the name of the next Stage of Change here: _____

List below the strategies you will use to help you graduate to the next stage for changing this risky behavior:

1. _____ 6. _____
2. _____ 7. _____
3. _____ 8. _____
4. _____ 9. _____
5. _____ 10. _____

(d) Total the number of strategies for graduation and enter here:

HARM REDUCTION WITH LATEX

“Letting Go of Fear” Client Worksheet



Stages of grief:

Place an “x” in one of the boxes below to indicate the stage of grief you are currently in with regard to HIV infection:

Denial Anger Bargaining Depression Acceptance Hope

Fears about HIV:

In the space below, list the three things you fear most about HIV:

1. _____
2. _____
3. _____

Step toward letting go of fear:

Select **one** fear from those you listed above and, in the space below, describe **one** step you can take **this week** to begin letting go of that fear (e.g., make an appointment to talk to your health care provider or counselor, go to a support group meeting, go to the library and read about HIV). **Be specific.**

This week I will do the following: _____

I will do this on:

Mon. Tues. Wed. Thur. Fri. Sat. Sun.

Lifetime goals:

List three things that are important to you to accomplish in your life. **Be realistic!**

1. _____
2. _____
3. _____

Steps toward accomplishing lifetime goals:

Select **one** goal from the goals you listed above and, in the space below, describe one step you can take **this week** toward accomplishing this goal. **Be specific.**

This week I will do the following: _____

I will do this on:

Mon. Tues. Wed. Thur. Fri. Sat. Sun.

- Identifying the Harm of Unsafe Sexual Practices
- Learning Harm Reduction Techniques (e.g., condom selection and application)

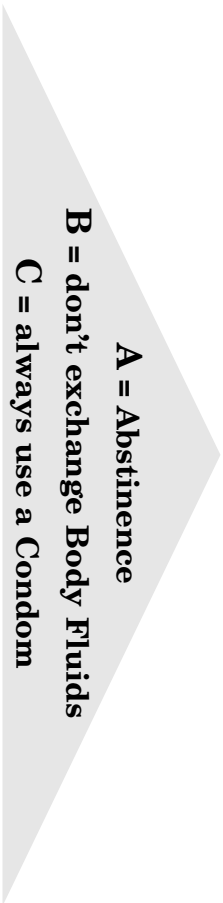
Skills to Be Learned

The ABCs of Reducing Harm with Latex

HHRP+

Amusing Epitaphs: R.I.P. (Rest In Peace)

HHRP+



A = Abstinence

B = don't exchange Body Fluids

C = always use a Condom

A = Abstinence

The only way to completely prevent all harm is abstinence.

B = don't exchange Body fluids

Other than abstaining from sex, the best way of avoiding harm is by engaging in sexual practices that do not involve the exchange of Body fluids (e.g., mutual masturbation).

C = always use Condoms

If you are going to engage in vaginal or anal intercourse or vaginal or anal oral sex, always use a condom and other latex protection.

Here lies a man who while he lived
Was happy as a linnet
He always lied while on the earth
And now he's lying in it

A widower placed two messages, one year apart, on his wife's tombstone:
In 1890, he wrote:
The light of my life has gone out
In 1891, he wrote:
I have struck another match

Here lies an Atheist
All dressed up
And no place to go

Here lies
Johnny Yeast
*Pardon me
For not rising*

I made an ash of myself

Here lies Lester Moore
Four slugs from a .44
No Les No More

A contented man:
Here I lie snug as a bug in a rug.
*The contented man's relative
in a nearby grave:*
Here I lie snuggler than that other bugger.

W. C. Fields:
On the whole,
I'd rather be in Philadelphia

Here lies
Ezekial Aikle
Aged 102
The Good Die Young

On a dentist's tombstone:
Stranger,
Approach this spot with gravity
John Brown is filling his last cavity

John Dryden's epitaph for his wife:
Here lies my wife
Here let her lie!
Now she's at rest
And so am I.

Here lies the body
Of Jonathan Blake
Stepped on the gas
Instead of the brake

She lived with her husband of fifty years
And died in the confident hope
Of a better life

Epitaph found in a Georgia cemetery:
I told you I was sick!

Here lies Ned
There is nothing more to be said—
Because we like to speak well of the dead

*Found in Hookstown, PA,
on tombstone with an etching of a
marijuana plant on it:*
Hi!
Stay high
Bye

The ABCs of Reducing Harm with Latex (page two)

Important points to remember:

1. The only way to completely prevent harm is abstinence.
2. Safer sex = no exchange of bodily fluids.
3. The first step to having safer sex is being sober.
4. Besides not having sex, the best way to protect yourself against sexually transmitted diseases (STDs) is by always using latex or polyurethane condoms.
5. Condoms that are kept on all the way through sex help prevent the spread of sexually transmitted viruses, including HIV, hepatitis B and C, and other STDs.
6. STDs often cause genital lesions or sores that make it easier for you to get infected with HIV, and hepatitis B and C, and also make it easier for you to infect others if you are already infected.
7. Use only latex or polyurethane condoms. Condoms made of lambskin, sheepskin, and other natural materials do **not** protect you from getting HIV, hepatitis B or C, or other sexually transmitted diseases.
8. Always check expiration date on condom package.
9. Store condoms in a cool, dry place; out of direct sunlight.
10. Use only water-based lubricants; never use oil-based lubricants with latex.
11. Use lubricants inside partner and inside tip of condom for increased sensation.
12. Put on condom before any genital contact.
13. Don't open condom package with teeth; you can tear the condom.
14. Roll condom down over penis to base; don't pull it.
15. Pull out of vagina/anns/mouth right after ejaculating/coming.
16. The knot in condom and dispose of it.
17. Never reuse male or female condoms, and never use both at the same time.
18. Female condoms are polyurethane, baglike devices that are placed in the female genital canal to protect it from seminal fluid and blood.
19. Female condoms reduce the risk of acquiring diseases, such as HIV, hepatitis C and B, and other STDs, and of becoming pregnant.
20. For oral sex, use non-lubricated condoms for oral-penis contact, and use dental dams for oral-vaginal and oral-anal contact. If no dental dams are available, a piece of condom or latex glove or nonmicrowavable plastic wrap, such as Saran Wrap® could be used; wash off the talcum powder if using latex).
21. Use latex gloves for hand-to-genital/hand-to-anal contact. Wash talcum off exterior of glove prior to use.
22. Clean lubricant applicators and sex toys after use.
23. Spermicides, such as diaphragm jelly and contraceptive sponges, do **not** kill HIV or hepatitis B or C, so they should never be used instead of condoms.
24. Avoid having sex during a woman's menstrual period.
25. Do not consume breast milk.

Remember Me by What I Valued



PART I. The house is on fire—what do you save?

Imagine that your house is on fire. All your loved ones and pets are safe. You have three minutes to select just **three** items from your house that you would want to save. Write your choices below:

PART II. Epitaph.

Write an amusing epitaph based on the three items you chose to save. Be creative, let go of your fear, and have fun.

How to Use a Condom

(page two)

DON'T unroll condom; instead carefully roll on all the way toward the base of the penis.

DON'T put condom on only when you are ready to enter your partner -- it may be too late. Drops of semen may ooze from the uncovered penis before ejaculation and may infect or impregnate your partner

DON'T twist, bite, or prick condom with a pin -- this will damage it and allow fluid to leak out, possibly infecting

How to Take the Condom Off

DO hold the condom at the rim; remove soon after ejaculation.

DO keep used condom away from partner's genitals.

DON'T let penis go soft inside partner — condom may drop off, and protection is lost.

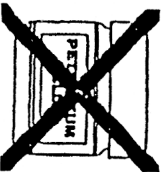
DON'T tug to pull condom off — it may tear.

DON'T allow semen to spill on your hands or body. Wash hands or body parts if contact occurs. Wrap condom in tissue and dispose of safely.

DON'T allow semen to come in contact with a skin break, cut, or open wound.

Special Points to Remember

• If you buy unlubricated condoms, you may need to buy a lubricant. Use only **water-soluble** lubricants such as spermicidal jelly or water.



- **Don't use oil-based lubricants** such as petroleum jelly or vegetable oil with latex condoms, since they can damage the condoms.
- **Never use a condom more than once.**
- **Correct use of condoms increases comfort, and promotes a sense of security in having safer sex.**

HEALTHY SOCIAL RELATIONSHIPS AND ACTIVITIES

Skills to Be Learned

- Identifying and Maintaining Healthy Social Relationships
- Communicating HIV Status
- Identifying and Engaging in Healthy Social Activities

Using the Male Condom



1. Use a new condom with each act of intercourse and check the expiration date.
2. Carefully open the condom package. (Avoid damaging it with fingernails, teeth, or other sharp objects).
3. Put the condom on as soon as the penis is erect and before any genital contact with the partner.
4. Pinch the reservoir tip to ensure that no air is trapped in the tip of the condom. (This can cause the condom to break).
5. Use only water-based lubricants (e.g., K-Y Jelly or glycerin) with latex condoms (oil-based lubricants (e.g., petroleum jelly; shortening; mineral oil, massage oils, body lotions, or cooking oil) weaken latex and should never be used).
6. Hold the rim of the condom firmly against the base of the penis during withdrawal, and withdraw while the penis is still erect to prevent spillage.
7. When removing the condom, be certain to milk the condom off from the base of penis, to ensure that semen does not spill out. Dispose of condom properly.
8. Avoid further sexual contact with your partner until both of you wash your sex organs and any other areas that came in contact with body fluids.

Are You Infected with USR's?



1. On the reverse side of this worksheet, write your first name in the center.
2. Identify your unhealthy and healthy relationships (using the person's initials).

Unhealthy	Healthy
1. _____	1. _____
2. _____	2. _____
3. _____	3. _____
4. _____	4. _____
5. _____	5. _____
6. _____	6. _____
3. Then answer the following questions:
 - a) Does the number of drug-users you spend time with outnumber the number of non-drug users you spend time with?

Yes No
 - b) Do the activities you engage in with your drug-using "friends" and acquaintances help you to protect your health?

Yes No
 - c) Does the person you spend **the most** time with encourage you and help you to protect your health?

Yes No

If you answered "yes", protect and nurture this relationship. If you answered "no", it may be time to make an important decision—to choose between this relationship or your recovery.

Sources: Centers for Disease Control and Prevention (<http://www.cdc.gov/mmwr/preview/mmwrhtml/r5106a1.htm>)
 American Social Health Association (http://www.ashaid.org/std/aqs/condom_m.html)
<http://www.saferssex.org>

Using the Female Condom

HHRP+

The female condom is a sleeve-like device made of polyurethane. It has a small closed end, and a larger open end. Each end contains a flexible ring. Use this simple step-by-step guide to using female condoms to assure that you are using them properly during vaginal and/or rectal intercourse.

Here's How:

1. The female condom must be properly positioned before any contact occurs between the penis and vagina and/or rectum. The female condom may be used for both vaginal and rectal sexual intercourse.
2. For vaginal use, squeeze the smaller ring and insert it into the vagina. The large end should be placed over the vaginal opening to protect the outer genitalia from infection.
3. For rectal use the small ring should be removed. Place the condom over the erect penis. The condom will be inserted with your partner's penis.
4. Be sure the penis goes directly into the large ring to preclude unprotected sexual contact between the penis and the vagina or rectum.
5. Remove the condom immediately after sexual intercourse and before standing up. To avoid semen leakage the large outer ring should be twisted. Carefully pull the condom out and dispose of it.

Tips:

1. Take your time and push the female condom up to where you can feel the pubic bone. You will feel the pubic bone by curving your index finger when it is a couple of inches inside the vagina. If the female condom is too slippery to insert, let it go and start over.
2. Make sure the condom is inserted (not twisted) into the vagina.
3. Use care when storing condoms. They should not be kept in places with extreme temperatures either hot or cold. Do not store them in a pocket or billfold.
4. Use a new condom for each act of sexual intercourse. Do not use the same condom for vaginal and rectal sex.
5. Never use a male condom and a female condom at the same time.
6. Always use water-based lubricants with condoms. Oil-based lubricants will destroy latex condoms. Lubricants are not needed when condoms are used for oral sex.
7. Never throw a used condom into your toilet, they can easily clog up your pipes and require expensive plumbing repairs.
8. The female condom can be inserted up to 8 hours before sex. However, most women insert the condom between 2 to 20 minutes before sex. It is for **one-time use**. Use a new female condom with each sex act.

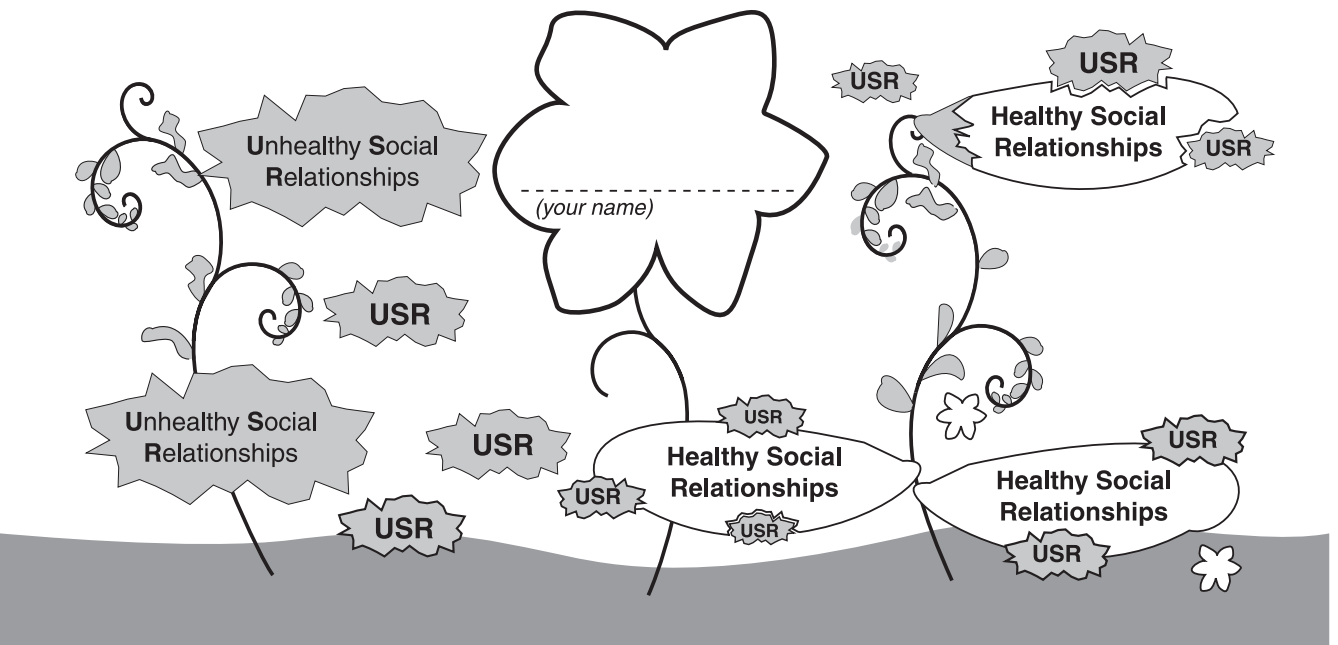
What You Need:

- Water-based lubricant
- Female condom

Sources: Centers for Disease Control and Prevention (<http://www.cdc.gov/mmwr/preview/mmwrhtml/r75106a1.htm>)
 The Female Condom Company (<http://www.femalehealth.com/theproduct.html>)
 American Social Health Association (http://www.ashastd.org/stdtags/condom_f.htm)
<http://www.safesex.org>

ARE YOU INFECTED WITH "USR"s?

Unhealthy **S**ocial **R**elationships
 infect, damage, and destroy Healthy Social Relationships



Condom Negotiation with Your Partner



Planning a “Fun-day” Team Worksheet



How to talk about condoms with a resistant, defensive, or manipulative partner

If your partner says: I’m on the pill, you don’t need a condom
You can say: I’d like to use it anyway. We’ll both be protected from infections we may not realize we have.

If your partner says: I know I’m clean (disease-free); I haven’t had sex with anyone in XXX months.
You can say: Thanks for telling me. As far as I know, I’m disease-free too. But I’d still like to use a condom since either of us could have an infection and not know it.

If your partner says: I’m a virgin.
You can say: I’m not. This way we’ll both be protected.

If your partner says: I can’t feel a thing when I wear a condom. It’s like wearing a raincoat in the shower.
You can say: Even if you lose some sensation, you’ll still have plenty left.

If your partner says: I’ll lose my erection by the time I stop and put it on.
You can say: I’ll help you put it on — that’ll help you keep it.

If your partner says: By the time you put it on, I’m out of the mood.
You can say: Maybe so, but we feel strongly enough for each other to stay in the mood.

If your partner says: It destroys the romantic atmosphere.
You can say: It doesn’t have to be that way.

If your partner says: Condoms are unnatural, fake, a total turnoff.
You can say: Please let’s try to work this out — an infection isn’t so great either. So let’s give the condom a try. Or maybe we can look for alternatives.

If your partner says: What kinds of alternatives?
You can say: Maybe we’ll just pet, or postpone sex for a while.

Select day for activities: Saturday Sunday

Time	Specify the Activity	Estimate Cost	Preparations Required
10:00 AM			
10:30			
11:00			
11:30			
12:00 PM			
12:30			
1:00			
1:30			
2:00			
2:30			
3:00			
3:30			
4:00			
4:30			
5:00			
5:30			
6:00			
6:30			
7:00			
7:30			
8:00			
Total hours _____ (minimum five hrs)		Total cost \$ _____ (maximum \$30)	

NEGOTIATING HARM REDUCTION WITH PARTNERS

HHRP+ Client Workbook

Skills to Be Learned

- Harm Reduction Negotiation and Communication Skills
- Eroticizing Safer Sexual Practices

Schedules:

- NA Schedules
- Needle Exchange Locations
- Transportation Schedules

How to Talk with Your Partner about Safer Sex



1. Learn as much as you can about HIV, HBV, HCV, and other STDs. That will make it easier to talk about safer sex.
2. Decide when you want to talk. The best time is not just before having sex or when you are high.
3. Decide in your own mind what you will and won't do during sex.
4. Give your partner time to think about what you're saying. Don't rush.
5. Pay attention to how your partner understands what you're saying.
6. Slow down if you need to.
7. Talk about the times that make it hard to have safer sex. These may be times when you don't have condoms or have used alcohol or drugs. Try to decide what to do at those times so you can both reduce the risk of contracting HIV, HBV, and HCV.
8. If your partner does not want to practice safer sex, ask yourself if this is the type of person you really want to have sex with. When drugs and alcohol are used, be more attentive to prevention behaviors such as using condoms.
9. If your partner gets angry or threatens you when you raise the issue of condoms, seek help from a violence prevention program.

Please refer to Group 3 Handout, Condom Negotiation with Your Partner (pg. 16), for other strategies.

PLACE-HOLDER

LOCAL NA SCHEDULE

101 Ways to Make Love without “Doin It”



1. Tell the other person that you love them
2. Give or get a hug
3. Make the other person feel important and respected
4. Kiss
5. Have fun together
6. Tell the other person that you care
7. Hold hands
8. Go for a long bike ride
9. Give a special gift
10. Be there when a friend is needed
11. Spend time together
12. Go to a movie
13. Walk arm in arm in the woods
14. Share dreams with each other
15. Snuggle up together
16. Sit together in the park
17. Have a special tape of love songs
18. Talk openly about your feelings
19. Take a walk together
20. Go out to eat
21. Have a picnic
22. Play a game of Frisbee
23. Give compliments
24. Relax in a whirlpool
25. Go swimming
26. Just be close
27. Go grocery shopping
28. Cook a meal together
29. Touch each other in a loving way
30. Do homework together
31. Plan and go on a road trip together
32. Throw a party together
33. Bake cookies
34. Go to the library
35. Browse in a museum
36. Just be there
37. Find out what's special for the other person and do it
38. Exercise together
39. Gaze at each other
40. Wash each other's cars
41. Go fishing
42. Talk to each other
43. Listen to hurts
44. Do a work project together
45. Choose a special, favorite song
46. Listen to joys
47. Hold one another close
48. Use eye contact to share a private thought
49. Write each other letters
50. Talk on the telephone
51. Trust one another
52. Give or receive a promise ring
53. Meet other's family
54. Go hiking together
55. Make sacrifices for one another
56. Walk
57. Hide a love note where the other will find it
58. Send candy
59. Respect each other
60. Go for a moonlight walk
61. Give each other sexy look
62. Write a poem
63. Send flowers
64. Eat dinner by candlelight
65. Go to a concert
66. Watch the sunrise together
67. Take a drive together

PLACE-HOLDER
NEEDLE EXCHANGE
PROGRAM SCHEDULE

101 Ways to Make Love without “Doin It”

(page two)

- 68. Give each other pet names
- 69. Go sightseeing
- 70. Rent a video
- 71. Do things for each other without being asked
- 72. Propose marriage
- 73. Whisper something nice into the other's ear
- 74. Be best friends
- 75. Take a carriage ride through the park
- 76. Go out dancing
- 77. Play music together
- 78. Flirt with each other
- 79. Laugh at something funny together
- 80. Be faithful
- 81. Impress each other
- 82. Make a list of things you like about each other
- 83. Read a book and discuss it
- 84. Meet each other's friends
- 85. Go riding
- 86. Cook each other's favorite foods
- 87. Find out what makes the other happy
- 88. Make each other gifts
- 89. Be caring
- 90. Watch the sunset
- 91. Dedicate a song on the radio
- 92. Send a funny card
- 93. Share lifetime goals with each other
- 94. Play "footsie"
- 95. Share private jokes
- 96. Think about each other
- 97. Find out what makes the other sad
- 98. Go skating
- 99. Trade class rings
- 100. Share an ice cream cone
- 101. Have your picture taken together

Bus Schedules



Destination: _____

Bus Number: _____

Bus Stop: _____

Departure Times: _____ Arrival Times: _____

Directions: _____

Destination: _____

Bus Number: _____

Bus Stop: _____

Departure Times: _____ Arrival Times: _____

Directions: _____

PREVENTING RELAPSE TO RISKY BEHAVIOR: RECOVERY AS A JOURNEY

MANAGING UNHEALTHY EMOTIONS

(page two)

Skills to Be Learned

- Create a Road Map for the Journey of Recovery
- Learn Relapse Prevention Skills
- Identify Early Warning Signs
- Understand Seemingly Irrelevant Decisions

Planned Parenthood of Connecticut: 387-3131

50 Fitch Street

New Haven, CT 06515

Information and counseling around issues of human sexuality, family planning and pregnancy

AIDS Interfaith Network: 624-4350

1303 Chapel Street

New Haven, CT 06511

Weekly Support Group for AIDS; Counseling Individual & Family; Clothing; Food; Medical transportation; They also provide a number of other services.

Domestic Violence Services of Greater New Haven: 789-8104

P.O. Box 1329

New Haven, CT 06505

Provide support groups, crisis intervention counseling, protective services.

Parents Anonymous: 1-800-841-4314

60 Lorraine St.

Hartford, CT 06105

Selfhelp group for parents under stress who want to improve their relationships with their children.

Sexual Assault Intervention: 624-2273

131 Dwight Street

New Haven, CT 06511

Personal Road Map for Journey of Recovery



LEARNING HOW TO HAVE FUN WITHOUT DRUGS

Rules of the Road: *My personal warning signs that there may be a high risk situation ahead are as follows:*

External warnings

Internal warnings

_____	_____
_____	_____
_____	_____
_____	_____

Tools and Skills I Need for My Journey of Recovery:

- | | |
|----------|----------|
| 1) _____ | 4) _____ |
| 2) _____ | 5) _____ |
| 3) _____ | 6) _____ |

Navigators: *Guides I can trust for my journey of recovery are:*

Name	Telephone
1) _____	_____
2) _____	_____
3) _____	_____

Ways I Can Make My Environment Safe, Reliable, and Supportive:

- 1) _____
- 2) _____
- 3) _____

UConn Extension: 789-7865
 305 Skiff St.
 North Haven, CT 06473
 Free information on gardening, health, nutrition.

Arts Council of Greater New Haven: 772-2788
 70 Audubon St.
 New Haven, CT 06511
 Cultural events calendar

City of New Haven Parks and Recreation: 946-8020
 720 Edgewood Ave.
 New Haven, CT 06511
 Information on programs run by the city parks; offers a number of different seasonal activities.

City of New Haven Libraries: 946-8130
 133 Elm Street
 New Haven, CT 06510
 Books, Information, Videos, Music, the libraries offer a number of different educational programs.

Adult Education: 946-5884
 Wilbur Cross High School
 New Haven, CT 06511
 Evening classes in a number of different areas including art and music. For evening computer classes call 946-8748, M-Th 7-9pm

Parents Without Partners: (860) 645-7722
 P.O. Box 274
 Hartford, CT 06101
 Membership organization that provides dances and support for single parents.

Museums:
 Peabody Museum of Natural History: 432-5050
 170 Whitney Avenue
 New Haven, CT 06511

Mystic MarineLife Aquarium: (860) 572-5955
 Coogan Boulevard
 Mystic, CT 06355

The Children's Museum: 562-5437
 567 State Street
 New Haven, CT 06511

Personal Road Map for Journey of Recovery

(page two)

VOCATIONAL SERVICES



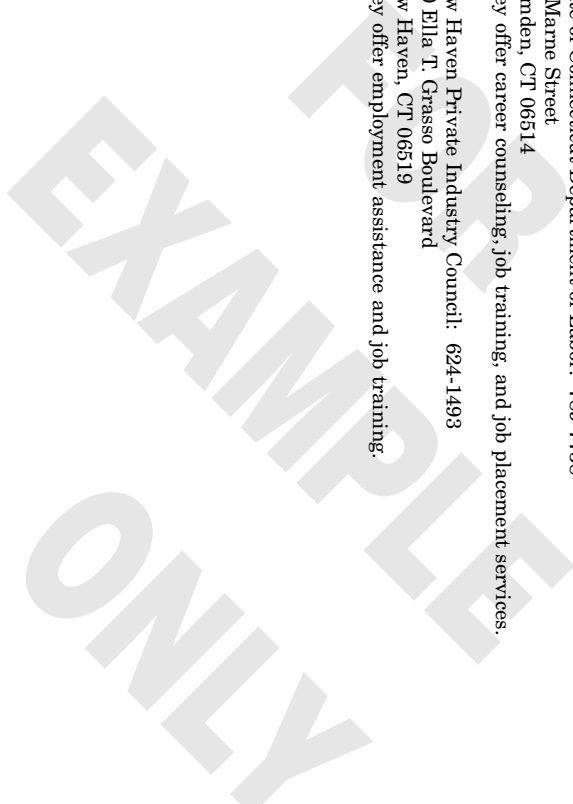
Emergency Procedure to Reduce Harm if I'm in a High Risk Situation:

1. In high risk sexual situations, I will always use condoms.
2. If injecting drugs, I will always use new or bleach-cleaned needle.
3. If I feel lost, in danger of doing something risky, or have already done something risky, I will call _____ for help.
(Telephone No.)
4. While waiting for help to arrive, I will remind myself of the benefits of resuming my journey of recovery, and the negative consequences to myself and others of continuing to take this detour.

Personal benefits of recovery	Negative consequences of detour
1) _____	1) _____
2) _____	2) _____
3) _____	3) _____

Referral List

- APT Vocational Services: 781-4670
 904 Howard Avenue
 New Haven, CT 06519
 Provides vocational counseling/training to APT clients.
- State of Connecticut Department of Labor: 789-7738
 37 Marne Street
 Hamden, CT 06514
 They offer career counseling, job training, and job placement services.
- New Haven Private Industry Council: 624-1493
 580 Ella T. Grasso Boulevard
 New Haven, CT 06519
 They offer employment assistance and job training.



SID Storytelling Game Worksheet



Each team will have 10 minutes to create a story about a guy (or gal) named Sid who is HIV-positive and is in a drug addiction treatment program.

Beginning:

The story begins with Sid deciding to engage in a particular activity:

Once upon a time, there was a guy/gal named Sid, who was going to:

_____ (Write the activity that your counselor has assigned to your team here)

Middle:

The story unfolds with Sid having to make several decisions related to this activity that could potentially put his recovery at risk.

On his way to _____ (activity)

Sid decides to: _____ (write decisions below)

Seemingly irrelevant decisions. One point for each seemingly irrelevant decision the team can identify that might jeopardize Sid's recovery while pursuing this activity:

- 1) _____ 6) _____
- 2) _____ 7) _____
- 3) _____ 8) _____
- 4) _____ 9) _____
- 5) _____ 10) _____

Ending:

The story should have a happy ending! The story ends with Sid successfully coping with the above situations and engaging in the activity without relapse.

SOCIAL SUPPORT



Schedules of NA and 12-Step Meetings

Twelve Step Club: 934-8756

63 Hamilton Street

New Haven, CT 06511

Drop-in Social center for recovering substance abusers. AA and NA groups held on site.

Information available at:

867 Jones Hill Rd. (CVS Plaza)

West Haven, CT 06516

AL-ANON Family Groups: (888) 825-2666.

New Haven, CT

Helps family members of substance abusers solve their common problems.

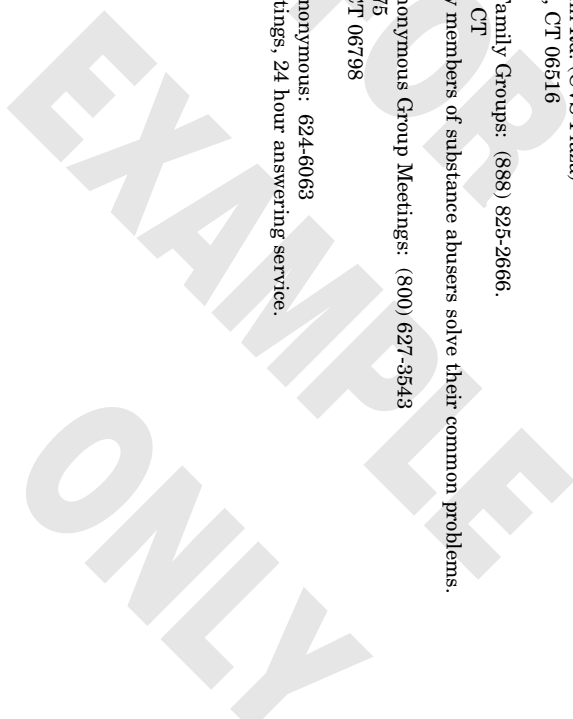
Narcotics Anonymous Group Meetings: (800) 627-3543

P.O. Box 1075

Woodbury, CT 06798

Alcoholics Anonymous: 624-6063

Call for meetings, 24 hour answering service.



SID Storytelling Game Worksheet

(page two)

ANGER MANAGEMENT



Sid successfully copes with each of these situations by:

Tools and/or skills demonstrated by Sid. One point for each tool or skill that Sid demonstrates in the story that helped him prevent or reduce harm to self or others.

- | | |
|----------|-----------|
| 1) _____ | 6) _____ |
| 2) _____ | 7) _____ |
| 3) _____ | 8) _____ |
| 4) _____ | 9) _____ |
| 5) _____ | 10) _____ |

- Team elects a storyteller to tell their story of Sid to the group.
- Team with the most points wins the game.

Note: Bonus points awarded for creativity and participation of all team members.

Yale New Haven Hospital: 688-4242

20 York Street

New Haven, CT 06510

Protective Services: Adult. Offers comprehensive medical care and crises intervention counseling.

Protective Services: Children. Child sexual abuse identification and treatment. Counseling for the family and child.

Birmingham Group - the Umbrella: 736-9944 or 736-2601

435 East Main Street

Ansonia, CT 06401

They offer self-help groups, individual and family counseling, emergency shelter for battered women, and a sexual assault crises intervention hotline.

Coordinating Council for Children In Crises: 624-2600

900 Grand Avenue

New Haven, CT 06511

They offer family education, protective services for battered women, protective services for children, and sexual assault intervention and treatment planning.

Department of Children and Families: 789-7678

2105 State Street

Hamden, CT 06514

They offer parents support groups, women's support services and shelter, protective services for children and emergency shelter.

Connecticut Mental Health Center (CMHC): 789-7300 or 789-7713

34 Park Street

New Haven, CT 06519

Comprehensive mental health services, family life education and support groups for parents, and protective services for children.

Domestic Violence Services of Greater New Haven: 789-8104 or 865-1957

P.O. Box 1329

New Haven, CT 06505

Provide support groups, crisis intervention counseling, protective services.

Hospital of St. Raphael Mental Health Resource Center: 784-8700

Offer a weekly therapy group for men who want to end their violence towards women. Fees are determined on a sliding scale.

