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An AIDS game to simulate and stimulate

THOSE working in the field of health education believe that an effective teaching programme on any health issue should aim to provide knowledge, explore attitudes, and encourage the adoption of the appropriate safe behaviour.

The AIDS Simulation Game has been devised with such a philosophy in mind. Whilst it is designed to meet the demand for materials aimed at pupil-centred and active learning, strategies are also offered as alternatives for those preferring more direction from the teacher. All the materials may be used across a range of abilities, and ages from middle secondary to adult.

Active exchange

The connection between the transmission of the HIV virus and the number of sexual partners is simulated by means of an active exchange game using number-tagged cards. The fact that the pupils are actually contacting and exchanging with others powerfully demonstrates the social nature of the disease. The simulation also dramatically shows:

 The terrific increase in infected persons once the HIV virus enters a population.

- The risks inherent in adopting a casual attitude to sexual relationships.
- The reduction of risk by use of a condom.
- The clear advantages of monogamous relationships.
- The attitudes and feelings engendered in a population threatened by AIDS.

The exercise is designed to simulate the spread of the HIV virus through a population. The active learning involved should present in a clear and understandable format the various aspects associated with the actual spread of the disease. In particular, it should simulate the following features:

Features

The fact that the participants are actually contacting and exchanging with others simulates the 'social' nature of the disease.

The potential dramatic increase of infected individuals in a population, as associated with any epidemic, is clearly shown.

The correlation between the number of sexual partners and the risk of infection. Conversely, the fact that even in a situation where there is only one sexual partner, infection can still occur.

The notion of the tracing of contacts can easily be demonstrated.

In situations where the group is made up from, say, four sub-groups, observations can be made comparing exchanging behaviour with the extent of infection. For example, a subgroup which contains not a single 'infected' individual, and which only exchanges within itself, will at the end of the simulation remain uninfected. On the other hand, another sub-group, also not infected at the start but being more open with their exchanges, will end up with a high rate of infection in its population. Parallels can be drawn here with regard to various centres of population in the county and the ease of transport by which disease can be spread more quickly.

Requirements

- 1. A reasonably large venue (such as the school hall), and a large group of participants. The simulation could be conducted with a normal size of class, but it is more realistic with a larger group. The results shown in this article were obtained using half a year group, comprising four classes and about a hundred individuals assembled in the school hall.
- 2. The exchange cards previously prepared with the exchange numbers.
- 3. A pen or pencil per individual.
- 4. An OHP and transparencies prepared with graph axes, and OHP pens. Another transparency of the exchange card to assist in the explanation of the rules.

How the game is played

The more participants, the better. Initially they are all allocated a seat or a place on the floor to which they return after each round.

Each player receives a card (see illustration), with the numbers 1–10 representing the ten rounds. There is also a separate number which we call

x. This is the number of rounds in which the player can 'exchange'. To begin with, each player decides which rounds will be chosen for making exchanges and makes a mark against the appropriate numbers on the card.

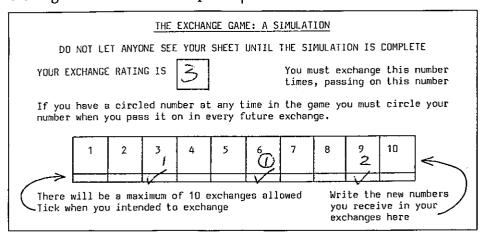
A few cards have a circle around x. These people are 'infected'

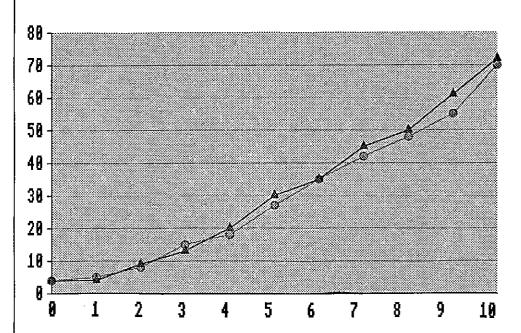
At the commencement of each round, those players selecting that round get up and move about. On the whistle they choose a partner and exchange numbers. If one of the part-

ners has a circled x, the other player circles the number they receive — they have been 'infected'. In future exchanges they too will pass the circle on

A record is kept of the way the circles spread. This can be done by the players recording the round when they became 'infected', or by taking a tally in between rounds.

[The following article describes the use of the game with 4th-year pupils. - Ed.]





Upper: The card used by the pupils. In this example the holder was asked to exchange three times, and chose the third, sixth, and ninth rounds to do so. On the second exchange an 'infected' partner, with an exchange rating of 1, was chosen.

Lower: Two graphs showing the transmission rate (vertical axis) in different simulations of ten exchanges each, conducted with a group of 100 pupils.