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**South African clinic pilots HIV health toolkit**

Edmonton – A year ago Mona Haimour, an assistant professor in the Bachelor of Science in Nursing program, stood in front of a gym with 80 teenagers to talk about HIV prevention. They were all students at a school in Durban, South Africa – right in the heart of the country’s ongoing HIV epidemic.

Haimour’s primary message that day wasn’t about abstinence or condoms, instead, she was testing out a new approach to HIV education that was developed in partnership with community health educators at the Blue Roof Wellness Centre, a clinic that specializes in the treatment of HIV/AIDS in Durban, and MacEwan University.

“We wanted to focus on the social and cultural needs of the students, so we looked at things through a different lens,” said Haimour. “One that was evidence-informed and focused on their growth and development as youth, their mental well-being, their decision making and risk-assessment skills, and access to health and social resources in their community.” Rather than showing dated videos and simply telling youth not to engage in risky sexual behavior, educators would help youth build knowledge and skills to make informed, positive choices about their bodies.

Haimour’s health promotion sessions at the school, along with the six weeks she spent there collecting data were the first steps towards creating what would become a comprehensive health promotion toolkit now being piloted by the outreach team in Durban. In early 2017, Haimour took the toolkit, complete with resources and mailed it to the facility in South Africa. Since then the community health outreach team has been piloting it – running education sessions and collecting data. They plan to present the outcomes at the annual conference on HIV/AIDS this summer in Durban.

“Standing in front of those students was so touching,” says Haimour. “They really seemed to enjoy the experience, and I saw the difference new approach can make and I hope the toolkit will play a part in helping youth at a time when they are most at risk for HIV.”

**POTENTIAL STORYLINES:**
1. How can the toolkit be used in other areas around the world were HIV is prominent?
2. How can the toolkit help educate individuals who do not believe they are at risk for contract HIV?
3. How does this project impact Haimour’s graduate studies in public and global health and her passion for advocacy?

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