

## **COUNSELLING AND HIV AND AIDS**

### **What are counseling, advice and guidance?**

Many people need support at some time in their lives. Some people seek help from friends or relatives, who may offer advice or guidance because they have had the same experience or are more knowledgeable the subject, or because it simply helps to get a different point of view.

Counseling aims at helping people resolve issues, but it is a more professional and structured way of assisting people than guidance and advice. Counseling may help a person to explore his/her life, feelings, strengths and weaknesses and to find new perspectives that can lead to real changes in sexual behavior and ways of relating to other people.

### **Is it important to take counseling before testing or receiving results?**

One of the pre-requisites of HIV counseling, according to the Tanzanian National Policy, is that no testing should be done without counseling. Counseling before HIV testing is important for each person because:

- It offers an opportunity to clarify aspects of HIV and AIDS.
- It helps the client to make an informed choice whether to test or not.
- It allows the client to express concerns and he/she can get psychological support.
- The client is helped to make risk assessment and plans to reduce the risk.
- The client is helped to prepare for the test results and issues that might arise.

Counseling is especially important for couples, as their HIV status may not automatically be the same. There are many discordant couples in Tanzania, in which one partner is HIV positive while the other one is not (see question below: "Why are couples allowed to take their tests separately?" for counseling discordant couples). Counseling has many advantages, especially for women. At antenatal care facilities, HIV testing is routinely in connection with HIV testing, counseling focuses on questions and problems that arise before going for a test, when living with HIV and AIDS, or when caring for a sick person.

Routine HIV test means that the service providers at the ANC facility give information about HIV testing and give the client the opportunity to ask questions before he/she goes for the HIV test. Only if the client refuses is the HIV test not performed.

Performed, together with other blood tests for pregnant women. Such facilities also offer counseling before testing. In case a woman is infected, she is informed about possibilities of treatment in time to protect her own health and her baby from an infection.

## **Why is counseling so private and confidential? Can it not be shown in pamphlets clear and open to many people?**

Counseling is not a *one size fits all* solution and therefore cannot be given through pamphlets. Both the counselor and the client need a private environment in order to concentrate and focus so that they can together explore the individual problem of the client and find ways to address the problem. The client will share specific personal details that are confidential - a factor that underlines the importance of privacy.

## **Why does a counselor need special counseling skills?**

Counseling skills are important in order to make the process easy, clear and more fruitful. A counselor will need to use a set of skills to move through the various steps of the counseling process. For example:

- Establishing a relationship and understanding of the client's problem in a manner that puts the client at ease.
- Exploring the problems and issues of the client, such as listening and questioning skills.
- Skills for ensuring that he/she has really understood the client.
- Skills for helping the client with action planning.

## **Is it important to inform relatives about one's HIV status?**

It is important for an HIV-positive person to identify a person(s) among his/her relatives to inform about his/her status. This is because the PLHIV will need different personal supports that cannot be offered by our health care system only. In order to live positively with HIV, one needs to be supported emotionally and materially. A client will be assisted by the counselor to identify one or more persons.

## **Why are the HIV testing rates of the general population still so low?**

During the last year, the national rates have gone up after the national testing campaign supported by the President. But still people hesitate to go for testing for several reasons. One might be HIV- and AIDS- related stigma that is still high in the population. Stigma is a process of devaluation of people either living with or associated with HIV and AIDS. Stigma is related to the idea that HIV is contracted through immoral behaviors.

Another reason why people may not want to go for a test is the fear that they will not be treated fairly at the test center. They may also fear a lack of confidentiality at the center and worry that they will experience stigma and discrimination because the results will not be kept confidential. People may also live in villages which are too far away from VCT centre to be able to go for testing. Another reason for not going for a test might be lack of awareness of the benefits of early HIV testing; people need to see real examples of PLHIV who are living healthy, positive lives. The population still needs to be educated on the benefits of knowing one's HIV status, along with the need to abandon stigma and discrimination.

## **Can the counselor force a client into taking an HIV test although the client may not really want it?**

**No!** A counselor does not have the right to force a person into taking an HIV test. A counselor's job is to help the client make an informed choice whether to test or not and to explain the benefits of knowing this status. If a client refuses to be tested, a counselor may explore the reasons and give the client the opportunity to raise his/her concerns. The clients should then be informed that if they change their minds they can always come for an HIV test at another time. But the client makes the decision whether to be tested or not.

## **Are all counselors' medical doctors? What about community counselors?**

It is stipulated in the National Guidelines for Voluntary Counseling and Testing by the Ministry of Health (NACP) that candidates for counseling training can be health care workers, teachers or social workers. So not all counselors are medical doctors and they don't have to be. All counselors, no matter their background, will have received a special training in counseling. Community counselors can be any trusted member of the community who is committed to patient care, community counseling and education. This can be a social worker, a traditional healer, health personnel, school teacher, a person living with HIV, etc. As they are members of the community, they speak the local languages and know about traditions and habits. They may need to receive special training in the basics of counseling and referring clients to special services. But in general it is important to mobilize resources from the community to promote behavior change.

## **How can somebody gain the skills and qualifications to become a counselor?**

To be a qualified counselor for HIV and AIDS in Tanzania, a person has to go through training in an institution that is recognized and accredited by the Ministry of Health and

Social Welfare (MoHSW). The training is for a minimum of six weeks. Afterwards, the practicing counselor will:

- Get regular supervision by a professional to ensure quality of counseling and to offer support for the counselor, and
- Get refresher trainings and in-service training for high-quality counseling and testing, so that counselors keep up with the new trends of the epidemic.

All counselors are expected to follow standards and regulations by the Ministry of Health and Social Welfare (MoHSW). Special trainings will also be provided for specialized counseling for clients such as young children, adolescents and handicapped people.

## **What are the characteristics of a good counselor?**

A good counselor may have the following skills and traits:

- Intellectually competent.
- Trustworthy – the counselor can be trusted to keep clients' information confidential, keeps his/her word and keeps time and appointments.
- Counselor's help should be honest, clear and unambiguous.
- Fair and tolerant - accepts the clients as they are without judgments.

- Open- minded – ready for differences in people, with the ability to be comfortable with and relate to people of different cultures.
- Empathetic – is able to understand the problem from the client's point of view.
- Warm and professional – a charming personality and well groomed.

### **What are the important points when training for counseling skills?**

Important points to remember when training for counselling are skills that will enable the counselor to move successfully through the steps of a counseling process as shown below:

#### **Steps of counseling process General Skills**

- Developing rapport e.g., putting the client at ease, explaining the working relationship Exploring the problem e.g., listening actively, questioning skills
- Ensuring understanding of the problem e.g., paraphrasing, empathy
- Exploring alternatives e.g., questioning skills, providing needed information
- Helping the client choose the best alternative e.g., identifying tasks, focusing
- Terminating session e.g., rewarding remarks, planning a contract

It is also crucial for the counselor to read carefully the non-verbal communication of the client (body language and facial expression) in order to understand his/her feelings better. Another important point to remember is that in applying these skills, one must take into consideration the individual and cultural differences of the clients.

#### **Why are counselors saying that being HIV positive is not a disease?**

Being HIV-positive means that the HIV virus can be found in the body fluids of a person. This does not necessarily mean that a person has any symptoms of AIDS. People can live with the virus for many years; they can be healthy and strong without being sick. Only later - when the immune system weakens - signs and symptoms will appear.

#### **Are PLHIV not supposed to have children?**

Wanting and having children is a human right for all people, regardless of HIV status. If an HIV-infected woman wants to have a child, it is crucial that the potential parent (and her partner) knows about all implications of the decision, for example, that an HIV infection does not hinder a normal course of pregnancy. She should know that about 30% of babies of infected mothers are born with the virus if no special measures are taken. The risk is much lower (2-5%) when:

- antiretroviral treatment is given during pregnancy or delivery,
- when the baby is delivered by Caesarean section, and
- When the baby is either exclusively breastfed for six month or not breastfed at all.

She should also know the development of the infection in her body and the situation of her immune system. She should also consider that she might die before her child has grown up and think about who could take care of the child if she dies. The role of the medical personnel and counselor is to assist a woman to consider all opportunities and threats-so that an informed decision can be made. During

antenatal care, women are offered comprehensive services that range from physical examinations and treatment of opportunistic infections to family planning and partner counseling, addressing the special needs of HIV-infected women.

### **Why are counselors not asking women to bring their husbands/partners for testing?**

It is one of the duties of the counselor during pre-test counseling to discuss with the client the importance of disclosing the test results to a spouse or partner. Later, during post-test counseling, the counselor discusses with the client strategies for partner notification and the importance of partner testing.

It might be that women are shy or afraid to tell their husbands because it might result in violence or end their marriage. Many people think that if one person is HIV positive, this automatically means the partner is positive too and there is no need to go for testing. This is not true! There are many couples in Tanzania who are *discordant*, meaning one is HIV positive and the other one is HIV negative. Only an HIV test will show this. A husband cannot conclude on his own status from the testing results of his wife. In the case of discordant couples, counseling should be done separately first. The positive partner is encouraged to share the results with his/her partner, but the decision to share must be jointly agreed upon by both partners.

The counselor gives information on HIV and AIDS that is pertinent to the discordant status (the window period, safe sex, childbearing, etc.). The negative partner is advised to come back for testing after three months (the window period). For the counselor, it is important to not take sides during counseling.

### **Why is behavior change so difficult to achieve in the community?**

Behavior change is difficult to achieve because it is never easy to change habits that people have practiced for a long time and to change traditions they believe in. It requires time to understand the need for change, and to accept the damages a habit may cause.

Only then may habits slowly start to change. Also, external factors like peer pressure, gender roles, cultures, economic hardship or poverty may influence whether we want to or can change certain behaviors.

### **What different types of counseling for HIV and AIDS exist?**

There are three different types of counseling:

#### **1. Individual Counseling**

This is one-to-one dialogue between the client and the counselor.

#### **2. Couple Counseling**

This is a dialogue between a counselor and two individuals who are in a sexual relationship. The counselor must ensure that each partner has given informed consent to VCT before conducting couple counseling.

### **3. Group Counseling**

This is a dialogue that involves a counselor and more than two individuals who share a common problem. It can be a powerful experience because people see that they share similar concerns, which can give strength and new hope.

### **Why are couples allowed to receive their HIV test results separately?**

There are some key principles of counseling that also apply to couples:

#### **1. Counseling**

No testing should be done without counseling.

**2. Non- discrimination:** All clients, whether HIV-negative or HIV-positive, shall receive the same consideration and care.

#### **3. Confidentiality**

The test result is only revealed to the person tested. It is everybody's individual decision to disclose the result to each other.

Yet disclosure is an important sign of a person's acceptance of his/her HIV status and the existence of AIDS in society in general. It thereby contributes to stigma reduction.

During counseling all clients are advised to share their test results with their partners, regardless of the outcome of the result. During training of counselors special attention is given to specific strategies for disclosure.

### **Why is the whole process of counseling so long? People can run away without having the second counseling!**

In the past, clients sometimes had to wait for two weeks for their HIV result. Now simple rapid tests are being used (national recommendation) and the waiting time has been reduced considerably. The testing kit used first is called Bio line™. If it is reactive it is double-checked with Determine™; if it shows non-reactive it is checked again with Ungodly™. Test results are usually available within 30 minutes.

Counseling is a procedure that involves several steps: pre-test counseling and posttest counseling. During the **pre-test counseling session**, the client is given important information about HIV and AIDS and is helped to make an assessment of his/her own level of risk behaviors and to draw a risk reduction plan. Assessment of his/her readiness to take the test and the importance of the notification of the spouse/partner or other significant person is discussed. The client is also given the opportunity to consider the meaning and impact of the test results on his/her life. At the end of the session the client should be able to make an informed decision about taking or not taking the HIV test. The counselor will then explain the procedure for the test. During the **post-test counseling session**, HIV test results are given as soon as possible to prevent clients from running away from the second session. The counselor's task is to:

- Explain the test results clearly and simply.
- Help the client understand test results.
- Explore client's reaction to the test result.
- assist the client to identify coping strategy and a significant other person(s) for support
- If the client is HIV positive.
- Discuss about partner/spouse notification.
- Go through the risk reduction plan and plan for ongoing care.
- Make the client comfortable to come for follow-up sessions.

Supportive sessions can be offered to anybody. It will depend on the current need of the client who may require counseling, support, or guidance in order to be empowered to live positively. (HIV is a life-long infection and clients can return to counseling during various stages of the infection, depending on their own physical and psychological needs). Supportive sessions can also include spouses or other family members or friends.

### **What kind of courage is needed for a person to declare his/her HIV status?**

It currently takes a lot of courage for a person to declare themselves openly to be HIV positive. But it also takes acceptance of one's own status and acceptance of the HIV virus being present in society. Courage is not built automatically, but takes time. It requires family support and understanding as well as support and encouragement from employers and those who have a similar condition. HIV-positive people can draw courage from the fact that HIV and AIDS is a manageable, chronic disease and not a death sentence. Regular counseling, access to medication and food, and knowing that close friends and relatives are there in support may influence a person to declare his/her HIV status.

### **During funerals why it is not announced openly when a person has died from HIV and AIDS-related illnesses?**

The main reason is stigma associated with the diseases. AIDS is often associated with moral violations of social traditions. This is even more pronounced when it comes to sexual relations, so people with HIV are considered to be doing something "bad" or being promiscuous. Therefore it is understandable that family members do not want to spoil the memory of the deceased by announcing that he or she died of an AIDS-related disease.

As long as people do not accept that HIV can infect anybody - the young, the old, the good, the bad, the beautiful, the ugly - they will continue to pretend that it is a problem of others not of themselves and their family.

### **What is the government doing to support VCT?**

To date, there are 1,200 trained counselors and more than 500 accredited Voluntary counseling and testing (VCT) sites in Tanzania. There is high demand for VCT sites and the government is cooperating with bilateral and multilateral donors to meet the needs of the population. The government is expanding VCT and introducing PMTCT services in VCT sites and is scaling up capacity of the workforce. In order to reduce obstacles to VCT services, the government has eliminated charges for VCT services

in government health facilities. All private health facilities receiving free test kits may only charge fees for administrative costs.

### **Do we have enough counselors for HIV-positive children?**

No, we do not have enough counselors for HIV positive children, and there is a need to train counselors specifically on counseling and support for young children and adolescents.

### **At which age can children be counseled?**

Counseling children can start at an age when a child can talk, draw and play. Children have many ways of communicating. They express themselves through play, drawing (sometimes even on the ground), making toys, and acting out situations through music, singing, dancing, and sometimes writing. Counseling for children uses one or several of understand the child's thoughts and feelings and to respond to the child in a way that is helpful.

At the age of 18, adolescents are considered to be at legal age of consent for VCT and can seek VCT services without consent of parents and guardians. But since sexual debut is much earlier than 18 years, access to VCT needs to be available. According to the "National guidelines for counseling and testing": "Adolescents who are married, have children or practice unsafe sex shall be categorized as 'mature minors' and permitted unrestricted access to VCT programme" (p.22).

With the aim of increasing access to prevention, care, and treatment and support, the National government has released guidelines for the introduction and scale up of provider-initiated testing and counseling services. The guidelines describe how health care workers can initiate the offer for HIV testing to a patient attending any health care facility in Tanzania.

### **Can counseling really help youth?**

Young people of today are growing up in communities that are different from the communities of their parents. Young people are vulnerable as growing up means trying out new things. When young people do not have accurate knowledge about their changing bodies, do not have skills to avoid risk situations, and lack continual support, they may be facing problems such as teenage pregnancy, STIs (including HIV) or drug abuse.

Counseling services run by youth friendly counselors can help reduce such problems and help young people change behavior.

### **Can youth become counselors as part of peer education programmes?**

A peer educator is a person who has been trained to deliver certain information to his/her peers. In order to be a counselor, one needs to have a body of knowledge on counseling which includes the theories, principles, skills, ethics and process of counseling as well as knowledge about the people they will be dealing with. For peer educators to become counselors, they must also acquire the necessary knowledge needed for counselors and fulfill the criteria (age, education level, etc.).

### **Where are counseling services in my area and how do I find them?**

The Council Health Management Team (CHMT) decides where VCT sites should be set up and accredits all district VCT sites and the Council HIV and AIDS Coordinator (CHAC) are to collaborate with the District Health Management Team (DHMT) in the accreditation process.

All services are registered at the District Commissioner's office. The role of CMAC members is to inform their communities about services. This information about counseling services, whether public or private (like NGO services), can be obtained from your CHAC or the District AIDS Control Coordinator (DACC) when it comes to health facility-based counseling. Information on youth-friendly counseling services should also be available from the CHAC/DACC.

### **Is there a National Policy on Counseling?**

There is no national policy on counseling, but the Ministry of Health and Social Welfare has developed National Guidelines for Voluntary Counseling and Testing. The guidelines stipulate principles of VCT, management of the counseling and testing procedures, training for human resources, accreditation of VCT sites, quality assurance and monitoring and evaluation.

### **Youth start sex at very early age, why is counseling not integrated in the school curriculum?**

At schools the following issues are addressed:

- Reproductive health; STIs and HIV and AIDS; and Life Skills are part of school curricula.
- Extra-curricular activities such as peer education programs or life skills camps are offered in some schools.
- Some schools also have trained school counselors, yet there is a shortage of teachers and also of teachers trained in counseling.

Besides those programmes in schools, it is a task for the CMAC to ensure that all youth have access to sex education and counseling in their communities using many channels of information and ensuring that all youth are reached not just those in schools.

### **Why can't government hospital separate youth counseling from adult counseling?**

Ideally there should be services for young people at every hospital, such as counseling or STI treatment. VCT services should be offered exclusively for young people and by youth friendly service providers who are trained in adolescent and young people's issues. Such services are sometimes combined with recreational activities, such as games, sports and music, as well as Sexual and Reproductive Health (SRH) education in the form of print and videos. In Tanzania we have very few youth-friendly services as described above, but one which is well-known is UMATI youth centers.

In other places one facility can offer adult services and youth-friendly services at separate times. Such types of youth-friendly services remain limited in Tanzania because of inadequate resources in terms of facilities and trained personnel.

### **What else can the CMAC do?**

The CMACs have a clear role: promote VCT and provide and ensure access to VCT services for all members of the community, especially for youth and key populations vulnerable to HIV. The minimum package explains the necessary planning steps for the CMAC to promote abstinence, delayed sexual debut, partner reduction and consistent condom use among young people in and out of school. In order to target the general population, the CMAC may want to expand workplace and community programmes, promote and expand VCT services, including STI.

CMACs are encouraged to advocate for youth-friendly services, especially in regards to HIV and AIDS and reproductive health. The CMACs can include youth-friendly information campaigns as well as establishment of youth-friendly services in the HIV and AIDS plan.

VCT sites should be designated with signboards that indicate the type of service available so clients can easily identify and access it. However, there should be no mention of the words 'HIV and AIDS'; instead use phrases like 'Confidential counseling and testing center'