

## **Module 3**

# **HIV testing and counselling and ethics**

# **HIV basic knowledge and stigma reduction in health care settings**

# Module goals

# Module 3: HIV testing and counselling and ethics

## Module 1

Participants will be able to:

- offer an insight into the epidemiological situation in the country and worldwide
- present the HIV transmission modes and the broad approaches to prevention
- implement post-exposure prophylaxis for HIV in the health care environment.

## Module 2

Participants will be able to:

- describe the natural history of the HIV infection
- expose the main circumstances in which the HIV infection is discovered
- describe some of the clinical manifestations of the HIV/AIDS infection.

## Module 3

Participants will be able to:

- name the techniques used for the biological diagnosis of the HIV infection
- argue the need to comply with ethical and confidentiality imperatives in the health care environment
- name the interventions to reduce HIV stigma and discrimination in health care settings.

## Module 4

Participants will be able to:

- inform a PLHIV about how care is organized in the country
- inform a PLHIV about the principles of care
- inform parents about the care available for a newborn baby, infant or child infected by HIV
- argue the need for optimal adherence to antiretroviral therapy.

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# HIV testing and counselling

Orientation to HIV testing and counselling  
Role of HIV testing and counselling

# Objectives

- Section 1: Orientation to HIV testing and counselling
- After completing the section, the participant will be able to:
  - Define counselling
  - Define HIV and AIDS counselling
  - Discuss the role of HIV and AIDS counselling

# Introduction

- Issues related to the diagnosis of HIV infection are complex
    - HIV is lifelong infection, fear of death
    - Transmission mainly through sexual contact or injecting drug use resulting in discrimination and stigma
    - No drugs are available to cure AIDS
- => Consensus about HIV diagnosis ➔ *The HIV testing and counselling concept*



## **What is counselling?**

- Process of helping a person ("client") learn how to deal with certain interpersonal, emotional and decision-making problems
- Aims at helping the client help himself/herself
- Counselling can be done with an individual or with couples or families

# Counselling is ...

- Client-centred – specific to the needs of each individual client
- An interactive, collaborative and respectful process
- Directed towards developing autonomy and self-responsibility in clients
- Asking questions, eliciting information, reviewing options and developing action plans

# What is HIV and AIDS counselling?

HIV and AIDS counselling is a confidential communication between a client and a care provider aimed at enabling the client to cope with stress and take personal decisions relating to HIV and AIDS

### Regarding HIV testing

- The purpose of counselling is to provide the client with adequate information to make an informed decision about HIV testing

## **Role of HIV testing and counselling**

- Is the only means for diagnosing HIV infection among persons who are fully willing to know their HIV status
- Is critical to the effectiveness of HIV prevention by promoting behaviour change to reduce HIV transmission
- Is essential to ensure effective use of health referral, treatment and care including treatment adherence

# Benefits of knowing one's HIV status

- At the individual level
  - earlier access to care
  - earlier access to treatment with better efficiency and better clinical outcome
  - appropriate access to specific interventions to prevent transmission (e.g. vertical transmission)
  - better cope with HIV infection and plan for the future

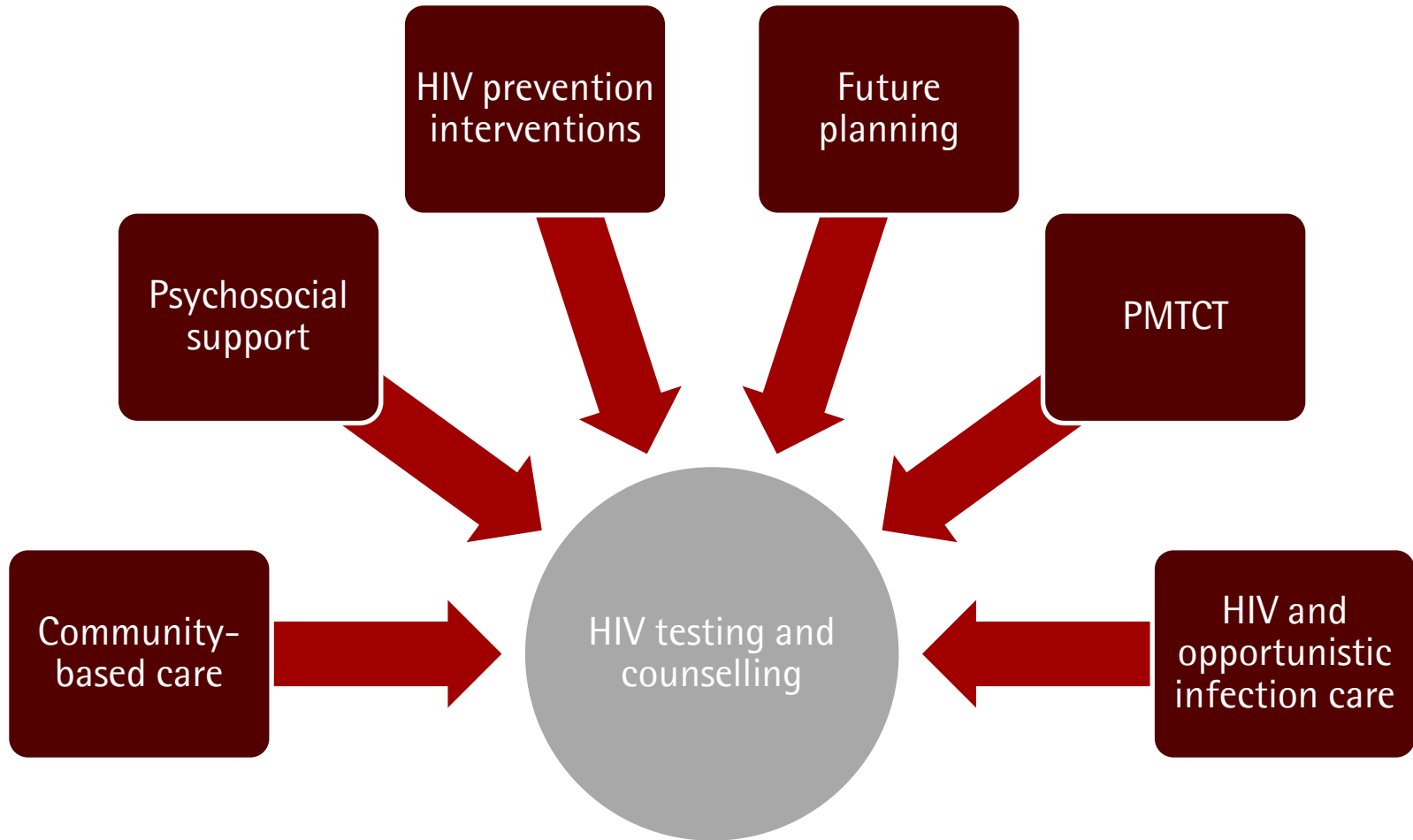
# Benefits of knowing one's HIV status

- At the community level
  - earlier and more sustainable adoption of safer behaviours
  - reduction in denial, stigma and discrimination among the community
  - mobilization of support for appropriate responses
  - early enrollment in treatment for PLHIV and better outcome, and therefore, "treatment as prevention" (TasP)

# Different approaches to HIV testing and counselling

- HIV testing and counselling can be:
  - Client-initiated, i.e. classic voluntary counselling and testing (VCT)
  - Initiated by the health-care provider, or “provider-initiated HIV testing and counselling” (PITC)
  - Diagnostic (in hospital settings for patients with obvious signs and symptoms suggesting AIDS)
  - Mandatory (against all human rights recommendations)
  - Community-based and outreach HIV testing and counselling.

## Role of HIV testing and counselling





Pre-test counselling session  
Post-test counselling session

# Objectives

- Section 2: Pre-test counselling and post-test counselling
- After completing the section, the participant will be able to:
  - Discuss the main guiding principles for HIV testing and counselling
  - Discuss content, steps and importance of HIV pre-test counselling
  - Discuss content, steps and importance of HIV negative post-test counselling
  - Discuss content, steps and importance of HIV positive post-test counselling

## Guiding principles of HIV testing

- *Voluntary* testing
- *Informed Consent*
- *Counselling* pre- and post-test
- *Confidentiality*
- Correct test result
- Connections to care and treatment services

"5C"

# Pre-test counselling

- Preparing the client for the HIV test
- Discussing about ways to cope with knowing one's HIV status
- Discussing sexuality, relationships, possible sex- and drug-related risk behaviours
- Discussing prevention
- Helping correct myths and misinformation

## **Pre-test counselling**

- Provision of information
- Assessment of the risk of HIV infection
- Response to the client's emotional needs
- Mutual trust and confidence relationship between the counsellor and the client

# Content of pre-test counselling (1)

- Information on HIV and AIDS
- Information on tests used and meaning of results ("positive", "negative")
- Information on the purpose of testing
- Information on the right to refuse testing
- Information on the treatment and support available once the result is known

## **Content of pre-test counselling (2)**

- Risk assessment and reason for testing
- Discussion on the implications of the test result and, in case of positive result, disclosure to partner(s)
- Future prevention strategies
- Informed consent

# Post-test counselling

- Post-test support and services are crucial
- Post-test counselling
  - helps the client understand and cope with the HIV test result
  - provides the client with any further information required



## **Content of post-test counselling**

### *Negative test result*

- Proposal of a new testing ("window" period)
- Enforcing prevention strategies
- Proposal of a referral (e.g. people who inject drugs)

## Content of post-test counselling

### *Positive test result*

- Clear and concise communication
- Ensuring understanding
- Discussing the meaning of the test result and its personal, familial, social and professional implications

# Content of post-test counselling

## *Positive test result*

- Risk reduction programme
- Options and personal resources inventory
- Information on care and psychosocial and emotional support services available
- Discussion on disclosure
- Referral

# Counselling for couples

- Benefits
  - Provides opportunity for mutual disclosure
  - Supports couples in developing a joint risk management plan
  - Provides opportunity for engaging men and enrolling them in care and treatment (ART, PMTCT, TasP)
  - Reduces stigma and discrimination
- Potential risk
  - Intimate partner violence?

# Objectives

- After completing the section, the participant will be able to:
  - Appreciate the importance of counsellor self-awareness
  - Appreciate the importance of respect for clients irrespective of values, culture, sexual orientation, etc.
  - Address or modify attitudes that may negatively impact the client–counsellor relationship

## **Counsellor self-awareness in relation to HIV and AIDS**

- What are my own feelings about people whose behaviour has placed them at risk of infection?
- What are my own feelings about people with HIV infection or AIDS?
- Which sexual practices would be most difficult to talk about, given my own personal and cultural values?
- What everyday/slang words would I use, or never use, to explain risk practices or behaviour to clients who may differ from me culturally or sexually, or are much younger or older?
- Can I use my own values as benchmarks for everyone?

# Values

- Please rank the following in terms of their value to you:
  - Health
  - Pleasure
  - Freedom
  - Sexuality
  - Family
  - Control
  - Career

## **Controversial statements (1)**

1. Women with HIV infection should not have children
2. People with AIDS should be allowed to continue work
3. AIDS is mainly a problem of people with immoral behaviour
4. Men who have sex with men indulge in abnormal sexual behaviour
5. People with HIV infection should be isolated to prevent further transmission
6. It is a collective responsibility to care for people with HIV infection



## **Controversial statements (2)**

7. I would feel uncomfortable inviting someone with HIV infection into my house
8. Surgeons should screen all patients for HIV infection before surgery
9. I would feel uncomfortable discussing sexuality with a person of the opposite sex
10. Injecting drug users should compulsorily be tested for HIV
11. It is all right for men to have sex before marriage
12. Schoolchildren should not be educated about safer sex
13. Women should never have extramarital sexual relations